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Indiana Nursing Licensure Laws and Regulations

**A Compilation from the Indiana Code and Indiana Administrative
Code**

2002 Edition



Distributed by the **Indiana State Board of Nursing**
and the **Indiana Health Professions Bureau**
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INDIANA STATE BOARD OF NURSING

2002 Edition

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IC 25-23
ARTICLE 23. NURSES

IC 25-23-1

**Chapter 1. Licensing of Nurses; Creation of Board;
Education Programs**

IC 25-23-1.1 Definitions

Sec. 1. As used in this chapter:

(a) "Board" means the Indiana state board of nursing.

(b) "Advanced practice nurse" means:

- (1) a nurse practitioner;
- (2) a nurse midwife; or
- (3) a clinical nurse specialist;

who is a registered nurse qualified to practice nursing in a specialty role based upon the additional knowledge and skill gained through a formal organized program of study and clinical experience, or the equivalent as determined by the board, which does not limit but extends or expands the function of the nurse which may be initiated by the client or provider in settings that shall include hospital outpatient clinics and health maintenance organizations.

(c) "Human response" means those signs, symptoms, behaviors, and processes that denote the individual's interaction with the environment.

(Formerly: Acts 1949, c. 159, s.1; Acts 1971, P.L.376, SEC.1; Acts 1974, P.L.119, SEC.1.) As amended by Acts 1981, P.L.228, SEC.1; P.L.169-1985, SEC.63; P.L.185-1993, SEC.2.

IC 25-23-1.1.1 Additional Definitions

Sec. 1.1. (a) As used in this chapter, "registered nurse" means a person who holds a valid license issued under this chapter, and who bears primary responsibility and accountability for nursing practices based on specialized knowledge, judgment, and skill derived from the principles of biological, physical, and behavioral sciences.

(b) As used in this chapter, "registered nursing" means performance of services which include but are not limited to:

- (1) assessing health conditions;
- (2) deriving a nursing diagnosis;
- (3) executing a nursing regimen through the selection, performance, and management of nursing actions based on nursing diagnoses;
- (4) advocating the provision of health care services through collaboration with or referral to other health professionals;
- (5) executing regimens delegated by a physician with an unlimited license to practice medicine or osteopathic medicine, a licensed dentist, a licensed chiropractor, a licensed optometrist, or a licensed podiatrist;
- (6) teaching, administering, supervising, delegating, and evaluating nursing practice;
- (7) delegating tasks which assist in implementing the nursing, medical, or dental regimen; or

(8) performing acts which are approved by the board or by the board in collaboration with the medical licensing board of Indiana.

(c) As used in this chapter, "assessing health conditions" means the collection of data through means such as interviews, observation, and inspection for the purpose of:

- (1) deriving a nursing diagnosis;
- (2) identifying the need for additional data collection by nursing personnel; and
- (3) identifying the need for additional data collection by other health professionals.

(d) As used in this chapter, "nursing regimen" means preventive, restorative, maintenance, and promotion activities which include meeting or assisting with self-care needs, counseling, and teaching.

(e) As used in this chapter, "nursing diagnosis" means the identification of needs which are amenable to nursing regimen.

As added by Acts 1981, P.L.222, SEC.158. Amended by P.L.169-1985, SEC.64.

IC 25-23-1.1.2 "Licensed practical nurse" defined

Sec. 1.2. As used in this chapter, "licensed practical nurse" means a person who holds a valid license issued under this chapter and who functions at the direction of:

- (1) a registered nurse;
- (2) a physician with an unlimited license to practice medicine or osteopathic medicine;
- (3) a licensed dentist;
- (4) a licensed chiropractor;
- (5) a licensed optometrist; or
- (6) a licensed podiatrist;

in the performance of activities commonly performed by practical nurses and requiring special knowledge or skill.

As added by P.L.169-1985, SEC.65.

IC 25-23-1.1.3 "Practical nursing" defined

Sec. 1.3. As used in this chapter, "practical nursing" means the performance of services commonly performed by practical nurses, including:

- (1) contributing to the assessment of the health status of individuals or groups;
- (2) participating in the development and modification of the strategy of care;
- (3) implementing the appropriate aspects of the strategy of care;
- (4) maintaining safe and effective nursing care; and
- (5) participating in the evaluation of responses to the strategy of care.

As added by P.L.169-1985, SEC.66.

IC 25-23-1.1.4 "Certified registered nurse anesthetist" defined

Sec. 1.4. As used in this chapter, "certified registered nurse anesthetist" means a registered nurse who:

- (1) is a graduate of a nurse anesthesia educational program accredited by the American Association of Nurse Anesthetists (referred to as the "AANA" in this chapter) Council on Accreditation of Nurse Anesthesia Educational Programs or its predecessor;

(2) is properly certified by successfully completing the certification examination administered by the AANA's Council on Certification of Nurse Anesthetists or its predecessor; and

(3) is properly certified and in compliance with criteria for biennial recertification, as defined by the AANA Council on Recertification of Nurse Anesthetists.

As added by P.L.185-1993, SEC.3.

IC 25-23-1-2 Indiana state board of nursing; establishment; members; terms of office; vacancies

Sec. 2. (a) There is established the Indiana state board of nursing consisting of eight (8) members appointed by the governor, each to serve a term of four (4) years subject to death, resignation, or removal by the governor. Five (5) of the board members must be registered nurses who are committed to advancing and safeguarding the nursing profession as a whole. Two (2) of the board's members must be licensed practical nurses. One (1) member of the board, to represent the general public, must be a resident of this state and not be associated with nursing in any way other than as a consumer.

(b) Each appointed board member may serve until the member's successor has been appointed and qualified. Any vacancy occurring in the membership of the board for any cause shall be filled by appointment by the governor for the unexpired term. Members of the board may be appointed for more than one (1) term. However, no person who has served as a member of the board for more than six (6) consecutive years may be reappointed. Reappointments of persons who have served six (6) consecutive years as a member of the board may be made after three (3) years have elapsed.

(Formerly: Acts 1949, c.159, s.2; Acts 1971, P.L.376, SEC.2.) As amended by Acts 1981, P.L.222, SEC.159; P.L.169-1985, SEC.67; P.L.185-1993, SEC.4.

IC 25-23-1-3 Filling of vacancies; removal of board members

Sec. 3. On or before December 1 of each year and at any time there is a vacancy, the Indiana State Nurses' Association shall recommend to the Governor a list of qualified registered nurses for appointment to the Board in the number of not less than twice the number of registered nurse vacancies to be filled.

On or before December 1 of each year and at any time there is a vacancy, the Indiana Federation of Licensed Practical Nurses' shall recommend to the Governor a list of qualified licensed practical nurses and nurse educators of Practical Nurse Programs for appointment to the Board in the number of not less than twice the number of vacancies to be filled. The Governor may remove any member from the Board for neglect of any duty required by law or for incompetency or unprofessional or dishonorable conduct. *(Formerly: Acts 1949, c.159, s.3; Acts 1971, P.L.376, SEC.3.)*

IC 25-23-1-4 Qualifications of members of board; oath

Sec. 4. (a) Each registered nurse member of the board required by section 2 of this chapter must:

- (1) be a citizen of the United States;
- (2) be a resident of Indiana;

(3) have:

(A) graduated from an accredited educational program for the preparation of practitioners of professional nursing;

(B) been licensed as a registered nurse in Indiana;

(C) had at least five (5) years successful experience since graduation in administering, teaching, or practicing in an educational program to prepare practitioners of nursing or in administering or practicing in nursing service; and

(D) been actively engaged in the activities described in clause (C) for at least three (3) years immediately preceding appointment or reappointment; and

(4) be actively engaged in the activities described in subdivision (3)(C) throughout the member's term of office.

(b) Each licensed practical nurse member of the board required by section 2 of this chapter must:

(1) be a citizen of the United States;

(2) be a resident of Indiana;

(3) have:

(A) graduated from an accredited educational program for the preparation of practitioners of practical nursing;

(B) been licensed as a licensed practical nurse in Indiana;

(C) had at least five (5) years successful experience as a practitioner of practical nursing since graduation; and

(D) been actively engaged in practical nursing for at least three (3) years immediately preceding appointment to the board; and

(4) be actively engaged in practice throughout the member's term of office.

(c) Before entering upon the discharge of official duties, each member of the board shall file the constitutional oath of office in the office of the secretary of state.

(Formerly: Acts 1949, c.159, s.4; Acts 1971, P.L.376, SEC.4.) As amended by P.L.169-1985, SEC.68.

IC 25-23-1-5 Meetings; officers; quorum

Sec. 5. (a) The board shall meet annually. At its first meeting of the calendar year, it shall elect from the membership a president, a vice president, and a secretary. It shall hold such other meetings during the year as may be necessary for the transaction of its business.

(b) Three (3) registered nurse members, including one (1) officer of the board, constitute a quorum for consideration of all matters pertaining to registered nursing. A majority vote of the quorum is required for action of the board.

(c) One (1) licensed practical nurse member and three (3) registered nurse members of the board, including one (1) officer, constitute a quorum for consideration of all matters pertaining to practical nursing. A majority vote of the quorum is required for action of the board.

(Formerly: Acts 1949, c.159, s.5; Acts 1971, P.L.376, SEC.5.) As amended by Acts 1981, P.L.222, SEC.160; P.L.169-1985, SEC.69; P.L.149-1987, SEC.56.

IC 25-23-1-6 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-7 Powers and duties of the board

Sec. 7. (a) The board shall do the following:

(1) Adopt under IC 4-22-2 rules necessary to enable it to carry into effect this chapter.

(2) Prescribe standards and approve curricula for nursing education programs preparing persons for licensure under this chapter.

(3) Provide for surveys of such programs at such times as it considers necessary.

(4) Accredited such programs as meet the requirements of this chapter and of the board.

(5) Deny or withdraw accreditation from nursing education programs for failure to meet prescribed curricula or other standards.

(6) Examine, license, and renew the license of qualified applicants.

(7) Issue subpoenas, compel the attendance of witnesses, and administer oaths to persons giving testimony at hearings.

(8) Cause the prosecution of all persons violating this chapter and have power to incur necessary expenses for these prosecutions.

(9) Adopt rules under IC 4-22-2 that do the following:

(A) Prescribe standards for the competent practice of registered, practical, and advanced practice nursing.

(B) Establish with the approval of the medical licensing board created by IC 25-22.5-2-1 requirements that advanced practice nurses must meet to be granted authority to prescribe legend drugs and to retain that authority.

(10) Keep a record of all its proceedings.

(11) Collect and distribute annually demographic information on the number and type of registered nurses and licensed practical nurses employed in Indiana.

(12) Notify each registered nurse and licensed practical nurse residing in Indiana when final rules concerning the practice of nursing are published in the Indiana register.

(b) The board may do the following:

(1) Create ad hoc subcommittees representing the various nursing specialties and interests of the profession of nursing. Persons appointed to a subcommittee serve for terms as determined by the board.

(2) Utilize the appropriate subcommittees so as to assist the board with its responsibilities. The assistance provided by the subcommittees may include the following:

(A) Recommendation of rules necessary to carry out the duties of the board.

(B) Recommendations concerning educational programs and requirements.

(C) Recommendations regarding examinations and licensure of applicants.

(3) Appoint nurses to serve on each of the ad hoc subcommittees.

(c) Nurses appointed under subsection (b) must:

(1) be committed to advancing and safeguarding the nursing profession as a whole; and

(2) represent nurses who practice in the field directly affected by a subcommittee's actions.

(Formerly: Acts 1949, c.159, s.7; Acts 1971, P.L.376, SEC.6.) As amended by Acts 1977, P.L.172, SEC.29; Acts 1979, P.L.17, SEC.46; Acts 1981, P.L.222, SEC.161; P.L.169-1985, SEC.70; P.L.149-1987, SEC.57; P.L.185-1993, SEC.5; P.L.127-1994, SEC.1.

IC 25-23-1-7.1 Rules and regulations

Sec. 7.1. The board may adopt rules and regulations

applicable to nurse practitioners.

As added by Acts 1981, P.L.228, SEC.2.

IC 25-23-1-8 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-9 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-10 Compensation of board members

Sec. 10. (a) Each member of the board who is not a state employee is entitled to the minimum salary per diem provided by IC 4-10-11-2.1(b). Such a member is also entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties, as provided in the state travel policies and procedures established by the department of administration and approved by the state budget agency.

(b) Each member of the board who is a state employee but who is not a member of the general assembly is entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties, as provided in the state travel policies and procedures established by the department of administration and approved by the state budget agency.

(Formerly: Acts 1949, c.159, s.10; Acts 1971, P.L.376, SEC.9.) As amended by P.L.149-1987, SEC.58.

IC 25-23-1-10.5 Temporary permits; expiration; renewal

Sec. 10.5. (a) The board may issue a temporary permit to practice as a nurse to a nurse licensed to practice in another state or territory of the United States, who has applied to the board for licensure by endorsement and submitted proof of current licensure to the board. The permit is valid for ninety (90) days after issuance or upon denial of licensure by the board. The permit may be renewed by the board, for a period not to exceed ninety (90) days, if, in the determination of the board, it is not possible to complete the application process in that time period.

(b) Persons holding a temporary permit to practice as a nurse are subject to the disciplinary provisions of this chapter and IC 25-1-9.

(c) The board may establish by rule under IC 4-22-2 application procedures and requirements for the issuance of temporary permits under this section.

As added by P.L.169-1985, SEC.71. Amended by P.L.149-1987, SEC.59; P.L.152-1988, SEC.16; P.L.48-1991, SEC.38; P.L.243-1995, SEC.1.

IC 25-23-1-11 Registered nurse; application for license to practice; qualifications; examination; foreign applicants; issuance of license; fees

Sec. 11. (a) Any person who applies to the board for a license to practice as a registered nurse must:

(1) not have:

(A) been convicted of a crime that has a direct bearing on the person's ability to practice competently; or

(B) committed an act that would constitute a ground for a disciplinary sanction under IC 25-1-9;

(2) have completed:

(A) the prescribed curriculum and met the graduation requirements of a state accredited program of registered nursing that only accepts students who have a high school

diploma or its equivalent as determined by the board; or

(B) the prescribed curriculum and graduation requirements of a nursing education program in a foreign country that is substantially equivalent to a board approved program as determined by the board. The board may by rule adopted under IC 4-22-2 require an applicant under this subsection to successfully complete an examination approved by the board to measure the applicant's qualifications and background in the practice of nursing and proficiency in the English language; and

(3) be physically and mentally capable of and professionally competent to safely engage in the practice of nursing as determined by the board.

The board may not require a person to have a baccalaureate degree in nursing as a prerequisite for licensure.

(b) The applicant must pass an examination in such subjects as the board may determine.

(c) The board may issue by endorsement a license to practice as a registered nurse to an applicant who has been licensed as a registered nurse, by examination, under the laws of another state if the applicant presents proof satisfactory to the board that, at the time that the applicant applies for an Indiana license by endorsement, the applicant holds a current license in another state and possesses credentials and qualifications that are substantially equivalent to requirements in Indiana for licensure by examination. The board may specify by rule what constitutes substantial equivalence under this subsection.

(d) The board may issue by endorsement a license to practice as a registered nurse to an applicant who:

(1) has completed the English version of the Canadian Nurse Association Testing Service Examination;

(2) achieved the passing score required on the examination at the time the examination was taken;

(3) is currently licensed in a Canadian province or in another state; and

(4) meets the other requirements under this section.

(e) Each applicant for examination and registration to practice as a registered nurse shall pay a fee set by the board. The board may set a proctoring fee to be paid by applicants who are graduates of a state accredited school in another state. Payment of the fee or fees shall be made by the applicant prior to the date of examination.

(f) Any person who holds a license to practice as a registered nurse in Indiana may use the title "Registered Nurse" and the abbreviation "R.N.". No other person shall practice or advertise as or assume the title of registered nurse or use the abbreviation of "R.N." or any other words, letters, signs, or figures to indicate that the person using same is a registered nurse.

(g) Any person holding a license or certificate of registration to practice nursing as a registered nurse issued by the board which is valid on December 1, 1971, shall be considered to be licensed as a registered nurse under this chapter.

(Formerly: Acts 1949, c.159, s.11; Acts 1971, P.L.376, SEC.10; Acts 1974, P.L.119, SEC.3; Acts 1975, P.L.272, SEC.1.) As amended by Acts 1981, P.L.222, SEC.163; Acts 1982, P.L.113, SEC.58; P.L.169-1985, SEC.72; P.L.149-1987, SEC.60; P.L.152-1988, SEC.17; P.L.48-1991,

SEC.39; P.L.33-1993, SEC.30; P.L.181-1996, SEC.1; P.L.236-1999, SEC.1.

IC 25-23-1-12 Practical nurse; application for license to practice; qualifications; examination; foreign applicants; issuance; fees

Sec. 12. (a) A person who applies to the board for a license to practice as a licensed practical nurse must:

(1) not have been convicted of:

(A) an act which would constitute a ground for disciplinary sanction under IC 25-1-9; or

(B) a crime that has a direct bearing on the person's ability to practice competently;

(2) have completed:

(A) the prescribed curriculum and met the graduation requirements of a state accredited program of practical nursing that only accepts students who have a high school diploma or its equivalent, as determined by the board; or

(B) the prescribed curriculum and graduation requirements of a nursing education program in a foreign country that is substantially equivalent to a board approved program as determined by the board. The board may by rule adopted under IC 4-22-2 require an applicant under this subsection to successfully complete an examination approved by the board to measure the applicant's qualifications and background in the practice of nursing and proficiency in the English language; and

(3) be physically and mentally capable of, and professionally competent to, safely engage in the practice of practical nursing as determined by the board.

(b) The applicant must pass an examination in such subjects as the board may determine.

(c) The board may issue by endorsement a license to practice as a licensed practical nurse to an applicant who has been licensed as a licensed practical nurse, by examination, under the laws of another state if the applicant presents proof satisfactory to the board that, at the time of application for an Indiana license by endorsement, the applicant possesses credentials and qualifications that are substantially equivalent to requirements in Indiana for licensure by examination. The board may specify by rule what shall constitute substantial equivalence under this subsection.

(d) Each applicant for examination and registration to practice as a practical nurse shall pay a fee set by the board. The board may set a proctoring fee to be paid by applicants who are graduates of a state accredited school in another state. Payment of the fees shall be made by the applicant before the date of examination.

(e) Any person who holds a license to practice as a licensed practical nurse in Indiana may use the title "Licensed Practical Nurse" and the abbreviation "L.P.N.". No other person shall practice or advertise as or assume the title of licensed practical nurse or use the abbreviation of "L.P.N." or any other words, letters, signs, or figures to indicate that the person using them is a licensed practical nurse.

(Formerly: Acts 1949, c.159, s.12; Acts 1951, c.34, s.1; Acts 1971, P.L.376, SEC.11.) As amended by Acts 1981, P.L.222, SEC.164; Acts 1982, P.L.113, SEC.59; P.L.169-1985, SEC.73; P.L.149-1987, SEC.61; P.L.152-1988, SEC.18; P.L.33-1993, SEC.31.

IC 25-23-1-13 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-13.1 Midwives

Sec. 13.1. (a) An applicant who desires to practice midwifery shall present to the board the applicant's license as a registered nurse and a diploma earned by the applicant from a school of midwifery approved or licensed by the board or licensing agency for midwives that is located in any state.

(b) The applicant shall submit to an examination in midwifery prescribed or administered by the board. If the application and qualifications are approved by the board, the applicant is entitled to receive a limited license that allows the applicant to practice midwifery.

(c) The board shall adopt rules under IC 25-23-1-7:

- (1) defining the scope of practice for midwifery; and
- (2) for implementing this section.

As added by P.L.185-1993, SEC.6.

IC 25-23-1-14 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-15 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-16 Repealed

(Repealed by Acts 1981, P.L.222, SEC.296.)

IC 25-23-1-16.1 Expiration of license; renewal; fee

Sec. 16.1. (a) A license to practice as a registered nurse expires on October 31 in each odd-numbered year. Failure to renew the license on or before the expiration date will automatically render the license invalid without any action by the board.

(b) A license to practice as a licensed practical nurse expires on October 31 in each even-numbered year. Failure to renew the license on or before the expiration date will automatically render the license invalid without any action by the board.

(c) The procedures and fee for renewal shall be set by the board.

(d) At the time of license renewal, each registered nurse and each licensed practical nurse shall pay an additional three dollar (\$3) fee. The lesser of the following amounts from fees collected under this subsection shall be deposited in the impaired nurses account of the state general fund established by section 34 of this chapter:

(1) Three dollars (\$3) per license renewed under this section.

(2) The cost per license to operate the impaired nurses program, as determined by the health professions bureau.

As added by Acts 1981, P.L.222, SEC.168. Amended by P.L.169-1985, SEC.74; P.L.149-1987, SEC.62; P.L.127-1994, SEC.2.

IC 25-23-1-17 Receipts; use and disposition

Sec. 17. All moneys received shall be deposited with the treasurer of state at the end of each month and be placed by him in the general fund of the state. The expenses of said board shall be paid from the general fund upon appropriation being made therefrom in the manner provided for the making of such appropriations.

(Formerly: Acts 1949, c.159, s.17.) As amended by Acts 1981, P.L.222, SEC.169.

IC 25-23-1-18 Failure to renew; license; reinstatement

Sec. 18. (a) Any person who fails to renew a license before it expires shall be reinstated by the board upon meeting the requirements under IC 25-1-8-6.

(b) A person who fails to apply to reinstate a license under this section within three (3) years after the date it expires may be issued a license by the board if the person meets the requirements under IC 25-1-8-6.

(Formerly: Acts 1949, c.159, s.18; Acts 1951, c.34, s.4; Acts 1971, P.L.376, SEC.15; Acts 1975, P.L.272, SEC.4.) As amended by Acts 1981, P.L.222, SEC.170; P.L.169-1985, SEC.75; P.L.48-1991, SEC.40; P.L.33-1993, SEC.32; P.L.269-2001, SEC.17.

IC 25-23-1-19 Repealed

(Repealed by P.L.149-1987, SEC.120.)

IC 25-23-1-19.4 Advanced practice nurses; collaboration with licensed practitioner

Sec. 19.4. (a) As used in this section, "practitioner" has the meaning set forth in IC 16-42-19-5. However, the term does not include the following:

- (1) A veterinarian.
- (2) An advanced practice nurse.

(b) An advanced practice nurse shall operate in collaboration with a licensed practitioner as evidenced by a practice agreement, or by privileges granted by the governing board of a hospital licensed under IC 16-21 with the advice of the medical staff of the hospital that sets forth the manner in which an advanced practice nurse and a licensed practitioner will cooperate, coordinate, and consult with each other in the provision of health care to their patients.

As added by P.L.185-1993, SEC.7.

IC 25-23-1-19.5 Advanced practice nurses; authority to prescribe legend drugs

Sec. 19.5. (a) The board shall establish a program under which advanced practice nurses who meet the requirements established by the board are authorized to prescribe legend drugs, including controlled substances (as defined in IC 35-48-1).

(b) The authority granted by the board under this section:

- (1) expires on October 31 of the odd-numbered year following the year the authority was granted or renewed; and
- (2) is subject to renewal indefinitely for successive periods of two (2) years.

(c) The rules adopted under section 7 of this chapter concerning the authority of advanced practice nurses to prescribe legend drugs must do the following:

- (1) Require an advanced practice nurse or a prospective advanced practice nurse who seeks the authority to submit an application to the board.
- (2) Require, as a prerequisite to the initial granting of the authority, the successful completion by the applicant of a graduate level course in pharmacology providing at least two (2) semester hours of academic credit.
- (3) Require, as a condition of the renewal of the

authority, the completion by the advanced practice nurse of the continuing education requirements set out in section 19.7 of this chapter.

As added by P.L.185-1993, SEC.8. Amended by P.L.83-2000, SEC.1.

IC 25-23-1-19.6

Sec. 19.6. (a) When the board grants authority to an advanced practice nurse to prescribe legend drugs under this chapter, the board shall assign an identification number to the advanced practice nurse.

(b) An advanced practice nurse who is granted authority by the board to prescribe legend drugs must do the following:

(1) Enter on each prescription form that the advanced practice nurse uses to prescribe a legend drug:

(A) the signature of the advanced practice nurse;

(B) initials indicating the credentials awarded to the advanced practice nurse under this chapter; and

(C) the identification number assigned to the advanced practice nurse under subsection (a).

(2) Comply with all applicable state and federal laws concerning prescriptions for legend drugs.

(c) An advanced practice nurse may be granted authority to prescribe legend drugs under this chapter only within the scope of practice of the advanced practice nurse and the scope of the licensed collaborating health practitioner.

As added by P.L.185-1993, SEC.9.

IC 25-23-1-19.7 Advanced practice nurses; renewal of prescriptive authority

Sec. 19.7. (a) This subsection applies to an applicant for renewal who has never received a renewal of prescriptive authority under section 19.5 of this chapter and whose prescriptive authority has never lapsed. If the applicant was initially granted prescriptive authority:

(1) less than twelve (12) months before the expiration date of the prescriptive authority, no continuing education is required; or

(2) at least twelve (12) months before the expiration date of the prescriptive authority, the applicant shall, subject to IC 25-1-4-3, attest to the board that the applicant has successfully completed at least fifteen (15) contact hours of continuing education. The hours must:

(A) be completed after the prescriptive authority was granted and before the expiration of the prescriptive authority;

(B) include at least four (4) contact hours of pharmacology; and

(C) be approved by a nationally approved sponsor of continuing education for nurses, approved by the board, and listed by the health professions bureau as approved hours.

(b) This subsection applies to an applicant for renewal of prescriptive authority under section 19.5 of this chapter who is not described in subsection (a). The applicant shall, subject to IC 25-1-4-3, attest to the board that the applicant has successfully completed at least thirty (30) contact hours of continuing education. The hours must:

(1) be completed within the two (2) years immediately preceding the renewal;

(2) include at least eight (8) contact hours of pharmacology; and

(3) be approved by a nationally approved sponsor of

continuing education for nurses, be approved by the board, and be listed by the health professions bureau as approved hours.

As added by P.L.83-2000, SEC.2. Amended by P.L.269-2001, SEC.18.

IC 25-23-1-20 Application for permission to conduct a nursing education program

Sec. 20. Any institution which desires to conduct a nursing education program shall apply to the board and submit evidence that:

(1) it is prepared to give a minimum curriculum of organized instruction and clinical experience in nursing in conformity to the provisions of this chapter and the rules of the board. Such instruction and experience may be secured in one (1) or more institutions or agencies approved by the board; and

(2) it is prepared to meet other standards established by this chapter and by the board.

(Formerly: Acts 1949, c.159, s.20; Acts 1951, c.34, s.6.) As amended by Acts 1982, P.L.154, SEC.81; P.L.149-1987, SEC.63.

IC 25-23-1-21 Survey of board; approval; surveys of accredited schools

Sec. 21. (a) A survey of the institution or institutions of which the nursing education program is a part and of institutions affiliating with the nursing education program shall be made by the a designated representative of the board. The surveyor shall submit a written report of the survey to the board. If, in the opinion of the board, the requirements for an accredited school of nursing are met, it shall approve the school as an accredited school of nursing.

(b) From time to time as considered necessary by the board, it shall be the duty of the board, through a designated representative of the board, to survey all nursing education programs in the state. Written reports of such surveys shall be submitted to the board. If the board determines that any accredited nursing education program is not maintaining the standards required by the statutes and by the board, notice in writing specifying the defect or defects shall be immediately given to the nursing education program. A nursing education program which fails to correct these conditions to the satisfaction of the board within a reasonable time shall be removed from the list of accredited nursing education programs.

(c) The board may elect to utilize a nursing education program's accreditation by a national accrediting body approved by the board and the Council on Postsecondary Accreditation (COPA) as evidence that the program has met all or part of the required state standards and prescribed curricula for continuing accreditation of nursing education programs.

(Formerly: Acts 1949, c.159, s.21.) As amended by Acts 1981, P.L.222, SEC.172; P.L.149-1987, SEC.64.

IC 25-23-1-22 Repealed

(Repealed by P.L.149-1987, SEC.120.)

IC 25-23-1-23 Repealed

(Repealed by P.L.149-1987, SEC.120.)

IC 25-23-1-24 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-25 Repealed

Repealed by Acts 1981, P.L.222, SEC.296.)

IC 25-23-1-25.1 Repealed

(Repealed by P.L.152-1988, SEC.30.)

IC 25-23-1-26 Duty of attorney general

Sec. 26. It shall be the duty of the attorney-general to represent the board in any court in which an action may be filed for the review of an order of the board. The attorney-general may, at his discretion, call to his assistance in such action, the prosecuting attorney of the county in which such action is filed.

(Formerly: Acts 1949, c.159, s.26.)

IC 25-23-1-27 Specific violations; offense

Sec. 27. A person who:

(1) sells or fraudulently obtains or furnishes any nursing diploma, license or record;

(2) practices nursing under cover of any diploma or license or record illegally or fraudulently obtained or assigned or issued unlawfully or under fraudulent representation;

(3) practices nursing as a registered nurse or licensed practical nurse unless duly licensed to do so under this chapter;

(4) uses in connection with his name any designation tending to imply that he is a registered nurse or a licensed practical nurse unless duly licensed so to practice under this chapter;

(5) practices nursing during the time his license issued under this chapter is suspended or revoked;

(6) conducts a school of nursing or a program for the training of practical nurses unless the school or program has been accredited by the board; or

(7) otherwise violates this chapter; commits a Class B misdemeanor.

(Formerly: Acts 1949, c.159, s.27; Acts 1974, P.L.119, SEC.4.) As amended by Acts 1978, P.L.2, SEC.2543; Acts 1981, P.L.222, SEC.175.

IC 25-23-1-27.1 Limitations on application of chapter; "licensed health professional" defined

Sec. 27.1. (a) As used in this section, "licensed health professional" means:

(1) a registered nurse;

(2) a licensed practical nurse;

(3) a physician with an unlimited license to practice medicine or osteopathic medicine;

(4) a licensed dentist;

(5) a licensed chiropractor;

(6) a licensed optometrist;

(7) a licensed pharmacist;

(8) a licensed physical therapist;

(9) a licensed psychologist;

(10) a licensed podiatrist; or

(11) a licensed speech-language pathologist or audiologist.

(b) This chapter does not prohibit:

(1) furnishing nursing assistance in an emergency;

(2) the practice of nursing by any student enrolled in a

board approved nursing education program where such practice is incidental to the student's program of study;

(3) the practice of any nurse who is employed by the government of the United States or any of its bureaus, divisions, or agencies while in the discharge of the nurse's official duties;

(4) the gratuitous care of sick, injured, or infirm individuals by friends or the family of that individual;

(5) the care of the sick, injured, or infirm in the home for compensation if the person assists only:

(A) with personal care;

(B) in the administration of a domestic or family remedy; or

(C) in the administration of a remedy that is ordered by a licensed health professional and that is within the scope of practice of the licensed health professional under Indiana law;

(6) performance of tasks by persons who provide health care services which are delegated or ordered by licensed health professionals, if the delegated or ordered tasks do not exceed the scope of practice of the licensed health professionals under Indiana law;

(7) a physician with an unlimited license to practice medicine or osteopathic medicine in Indiana, a licensed dentist, chiropractor, dental hygienist, optometrist, pharmacist, physical therapist, podiatrist, psychologist, speech-language pathologist, or audiologist from practicing the person's profession;

(8) a school corporation or school employee from acting under IC 34-30-14;

(9) a personal services attendant from providing authorized attendant care services under IC 12-10-17; or

(10) an attendant who provides attendant care services as defined by IC 16-27-1-0.5.

As added by Acts 1981, P.L.222, SEC.176. Amended by P.L.169-1985, SEC.78; P.L.149-1987, SEC.66; P.L.156-1988, SEC.2; P.L.255-2001, SEC.18.

IC 25-23-1-27.2 Injunction from continuing violations of chapter; punishment

Sec. 27.2. The attorney general, the board, the prosecuting attorney, or any citizen of any county in which a person violates this article may maintain an action in the name of the state to enjoin the person from continuing in violation of this article. A person who is enjoined and who violates an injunction shall be punished for contempt of court. An injunction issued under this section does not relieve a person from criminal prosecution but is in addition to any remedy provided under criminal law.

As added by P.L.149-1987, SEC.67.

IC 25-23-1-27.5 Repealed

(Repealed by Acts 1981, P.L.222, SEC.296.)

IC 25-23-1-28 Transfer of powers and duties of state board of nurses registration and nursing education

Sec. 28. The Indiana state board of examination and registration of nurses is hereby abolished and all rights, powers and duties conferred before March 8, 1949, by law upon it, to the extent they do not conflict with the provisions of this chapter, are continued in full force and effect and are hereby transferred to and conferred upon the Indiana state board of nurses registration and nursing education hereby

created. Any investigation, proceedings, hearing or examination or any proceedings in any courts undertaken, commenced or instituted by or before March 8, 1949, may be conducted and continued to a final determination by the board hereby created in the same manner and with the same effect as if this chapter had not been passed; all contractual and other rights, legal or equitable, existing on March 8, 1949, of, or created by, any act of the Indiana state board of examination and registration of nurses are hereby saved and continued and transferred to the board hereby created and all appropriations for and funds held by the Indiana state board of examination and registration of nurses are hereby continued and transferred to the Indiana state board of nurses registration and nursing education. Students who have already commenced their training on March 8, 1949, may, at their option, qualify pursuant to the laws and regulations in effect March 7, 1949: provided such students complete their courses of training on or before May 15, 1949.

(Formerly: Acts 1949, c.159, s.29.) As amended by Acts 1982, P.L.154, SEC.84.

IC 25-23-1-29 Applicability of chapter; rule exemptions

Sec. 29. (a) This chapter does not apply to a nurse practicing in accordance with the practice and principles of the body known as the Church of Christ Scientist.

(b) A sanitarium, nursing home, or rest home provided that it is listed and certified by the Commission for Accreditation of Christian Science Nursing Organizations/Facilities, Inc. does not have to comply with any rule adopted by the board, except a rule that concerns the following:

- (1) The sanitary and safe conditions of the premises.
- (2) The cleanliness of operation.
- (3) The physical equipment.

(c) The chapter does not apply to a person if:

- (1) the person is licensed as a nurse in another jurisdiction;
- (2) the person is employed by an individual, an agency, or a legal business entity located in that jurisdiction;
- (3) the person's employment responsibilities include transporting a patient between jurisdictions;
- (4) no trip made by the person into Indiana for the purpose of transporting a patient lasts more than seventy-two (72) hours; and
- (5) the person does not make more than six (6) trips into Indiana for the purpose of transporting a patient during any twelve (12) month period.

As added by P.L.187-1991, SEC.1. Amended by P.L.1-1992, SEC.132; P.L.185-1993, SEC.10; P.L.111-1996, SEC.3.

IC 25-23-1-30 Nurse anesthetists; prescriptive authority not required to administer anesthetics

Sec. 30. Nothing in this chapter shall be construed as requiring a certified registered nurse anesthetist to obtain prescriptive authority to administer anesthesia under IC 25-22.5-1-2(12).

As added by P.L.185-1993, SEC.11.

IC 25-23-1-31 Rehabilitation of impaired registered nurse or licensed practical nurse

Sec. 31. (a) As used in this section, "impaired registered nurse or licensed practical nurse" means a registered nurse

or licensed practical nurse who has been affected by the use or abuse of alcohol or other drugs.

(b) The board shall assist in the rehabilitation of an impaired registered nurse or licensed practical nurse.

(c) The board may do the following:

(1) Enter into agreements, provide grants, and make other arrangements with statewide nonprofit professional associations or foundations to identify and assist impaired registered nurses and licensed practical nurses.

(2) Accept and designate grants, public and private financial assistance, and licensure fees to fund programs under subdivision (1) to assist impaired registered nurses and licensed practical nurses.

(d) Except as provided in subsection (f), all:

(1) information furnished to a nonprofit professional association or foundation, including interviews, reports, statements, and memoranda; and

(2) findings, conclusions, or recommendations that result from a proceeding of the professional association or foundation;

are privileged and confidential.

(e) The records of a proceeding under subsection (d) may be used only in the exercise of proper functions of the board, and may not become public records or subject to a subpoena or discovery proceeding.

(f) Information received by the board from the board designated rehabilitation program for noncompliance by the registered nurse or licensed practical nurse may be used by the board in any disciplinary or criminal proceedings instituted against the impaired registered nurse or licensed practical nurse.

(g) The board designated rehabilitation program shall:

(1) immediately report to the board the name and results of any contact or investigation concerning an impaired registered nurse or licensed practical nurse who the program believes constitutes a certain, immediate, and impending danger to either the public or the impaired registered nurse or licensed practical nurse; and

(2) in a timely fashion report to the board an impaired registered nurse or licensed practical nurse:

(A) who refuses to cooperate with the program;

(B) who refuses to submit to treatment; or

(C) whose impairment is not substantially or significantly alleviated through treatment, as determined by accepted medical standards.

As added by P.L.185-1993, SEC.12. Amended by P.L.243-1995, SEC.2.

IC 25-23-1-32 Reserved

Reserved

IC 25-23-1-33 Professing to be nurse practitioner or clinical nurse specialist; use of title

Sec. 33. (a) An individual may not:

(1) profess to be a nurse practitioner; or

(2) use the title "nurse practitioner";

unless the individual is a nurse practitioner.

(b) An individual may not:

(1) profess to be a clinical nurse specialist; or

(2) use the title "clinical nurse specialist";

unless the individual is a clinical nurse specialist.

As added by P.L.185-1993, SEC.13.

IC 25-23-1-34 Impaired nurses account

Sec. 34. (a) The impaired nurses account is established within the state general fund for the purpose of providing money for providing rehabilitation of impaired registered nurses or licensed practical nurses under this article. The account shall be administered by the health professions bureau.

(b) Expenses of administering the account shall be paid from money in the account. The account consists of the additional fee collected under section 16.1(d) of this chapter.

(c) The treasurer of state shall invest the money in the account not currently needed to meet the obligations of the account in the same manner as other public money may be invested.

(d) Money in the account is appropriated to the board for the purpose stated in subsection (a).

As added by P.L.127-1994, SEC.3.

initial application fee.

(4) If a law requires the holder to complete continuing education as a condition of renewal, the holder shall provide the board with a sworn statement, signed by the holder, that the holder has fulfilled the continuing education requirements required by the board for the current renewal period.

(5) Complete such remediation and additional training as deemed appropriate by the board given the lapse of time involved.

(6) Any other requirement that is provided for in statute or rule that is not related to fees.

As added by P.L.269-2001, SEC.5.

IC 25-1-9

Chapter 9. Health Professions Standards of Practice

IC 25-1-8

Chapter 8. Occupational and Professional Licensure, Registration, and Certification Fees

IC 25-1-8-6 Reinstatement of delinquent or lapsed license

Sec. 6. (a) As used in this section, "board" has the meaning set forth in IC 25-1-4-0.3.

(b) This section does not apply to a license, certificate, or registration that has been revoked or suspended.

(c) Notwithstanding any other law regarding the reinstatement of a delinquent or lapsed license, certificate, or registration, the holder of a license, certificate, or registration that was issued by the board that is three (3) years or less delinquent must be reinstated upon meeting the following requirements:

(1) Submission of the holder's completed renewal application.

(2) Payment of the current renewal fee established by the board under section 2 of this chapter.

(3) Payment of a reinstatement fee established by the health professions bureau.

(4) If a law requires the holder to complete continuing education as a condition of renewal, the holder shall provide the board with a sworn statement, signed by the holder, that the holder has fulfilled the continuing education requirements required by the board for the current renewal period.

(d) Notwithstanding any other law regarding the reinstatement of a delinquent or lapsed license, certificate, or registration, unless a statute specifically does not allow a license, certificate, or registration to be reinstated if it has lapsed for more than three (3) years, the holder of a license, certificate, or registration that was issued by the board that is more than three (3) years delinquent must be reinstated upon meeting the following requirements:

(1) Submission of the holder's completed renewal application.

(2) Payment of the current renewal fee established by the board under section 2 of this chapter.

(3) Payment of a reinstatement fee equal to the current

IC 25-1-9-1 "Board" defined

Sec. 1. As used in this chapter, "board" means any of the following:

(1) Board of chiropractic examiners (IC 25-10-1).

(2) State board of dentistry (IC 25-14-1).

(3) Indiana state board of health facility administrators (IC 25-19-1).

(4) Medical licensing board of Indiana (IC 25-22.5-2).

(5) Indiana state board of nursing (IC 25-23-1).

(6) Indiana optometry board (IC 25-24).

(7) Indiana board of pharmacy (IC 25-26).

(8) Board of podiatric medicine (IC 25-29-2-1).

(9) Board of environmental health specialists (IC 25-32).

(10) Speech-language pathology and audiology board (IC 25-35.6-2).

(11) State psychology board (IC 25-33).

(12) Indiana board of veterinary medical examiners (IC 15-5-1.1).

(13) Indiana physical therapy committee (IC 25-27-1).

(14) Respiratory care committee (IC 25-34.5).

(15) Occupational therapy committee (IC 25-23.5).

(16) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).

(17) Physician assistant committee (IC 25-27.5).

(18) Indiana athletic trainers board (IC 25-5.1-2-1).

(19) Indiana dietitians certification board (IC 25-14.5-2-1).

(20) Indiana hypnotist committee (IC 25-20.5-1-7).

As added by P.L.152-1988, SEC.1. Amended by P.L.242-1989, SEC.7; P.L.238-1989, SEC.7; P.L.186-1990, SEC.7; P.L.48-1991, SEC.20; P.L.227-1993, SEC.7; P.L.33-1993, SEC.14; P.L.213-1993, SEC.4; P.L.1-1994, SEC.122; P.L.124-1994, SEC.6; P.L.175-1997, SEC.6; P.L.147-1997, SEC.10; P.L.84-1998, SEC.5; P.L.24-1999, SEC.6.

IC 25-1-9-2 "Practitioner" defined

Sec. 2. As used in this chapter, "practitioner" means an individual who holds:

(1) an unlimited license, certificate, or registration;

(2) a limited or probationary license, certificate, or registration;

(3) a temporary license, certificate, registration, or

permit;

- (4) an intern permit; or
- (5) a provisional license;

issued by the board regulating the profession in question, including a certificate of registration issued under IC 25-20.
As added by P.L.152-1988, SEC.1.

IC 25-1-9-3 "License" defined

Sec. 3. As used in this chapter, "license" includes a license, certificate, registration, or permit.
As added by P.L.152-1988, SEC.1.

IC 25-1-9-3.5 "Sexual Contact" defined

Sec. 3.5. As used in this chapter, "sexual contact" means:

- (1) sexual intercourse (as defined in IC 35-41-1-26);
- (2) deviate sexual conduct (as defined in IC 35-41-1-9);

or

(3) any fondling or touching intended to arouse or satisfy the sexual desires of either the individual performing the fondling or touching or the individual being fondled or touched.

As added by P.L.200-2001, SEC.1.

IC 25-1-9-4a Professional standards; types of conduct prohibited; certified copy of record as conclusive evidence

Note: This version of section amended by P.L.200-2001, SEC.2. See also following version of this section amended by P.L.203-2001, SEC.3.

Sec. 4. (a) A practitioner shall conduct the practitioner's practice in accordance with the standards established by the board regulating the profession in question and is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds:

- (1) a practitioner has:

(A) engaged in or knowingly cooperated in fraud or material deception in order to obtain a license to practice;

(B) engaged in fraud or material deception in the course of professional services or activities; or

(C) advertised services in a false or misleading manner;

(2) a practitioner has been convicted of a crime that has a direct bearing on the practitioner's ability to continue to practice competently;

(3) a practitioner has knowingly violated any state statute or rule, or federal statute or regulation, regulating the profession in question;

(4) a practitioner has continued to practice although the practitioner has become unfit to practice due to:

- (A) professional incompetence that:

(i) may include the undertaking of professional activities that the practitioner is not qualified by training or experience to undertake; and

(ii) does not include activities performed under IC 16-21-2-9;

(B) failure to keep abreast of current professional theory or practice;

- (C) physical or mental disability; or

(D) addiction to, abuse of, or severe dependency upon alcohol or other drugs that endanger the public by impairing a practitioner's ability to practice safely;

- (5) a practitioner has engaged in a course of lewd or

immoral conduct in connection with the delivery of services to the public;

(6) a practitioner has allowed the practitioner's name or a license issued under this chapter to be used in connection with an individual who renders services beyond the scope of that individual's training, experience, or competence;

(7) a practitioner has had disciplinary action taken against the practitioner or the practitioner's license to practice in any other state or jurisdiction on grounds similar to those under this chapter;

- (8) a practitioner has diverted:

(A) a legend drug (as defined in IC 16-18-2-199); or

(B) any other drug or device issued under a drug order (as defined in IC 16-42-19-3) for another person;

(9) a practitioner, except as otherwise provided by law, has knowingly prescribed, sold, or administered any drug classified as a narcotic, addicting, or dangerous drug to a habitue or addict;

(10) a practitioner has failed to comply with an order imposing a sanction under section 9 of this chapter; or

(11) a practitioner has engaged in sexual contact with a patient under the practitioner's care or has used the practitioner-patient relationship to solicit sexual contact with a patient under the practitioner's care.

(b) A practitioner who provides health care services to the practitioner's spouse is not subject to disciplinary action under subsection (a)(11).

(c) A certified copy of the record of disciplinary action is conclusive evidence of the other jurisdiction's disciplinary action under subsection (a)(7).

As added by P.L.152-1988, SEC.1. Amended by P.L.2-1993, SEC.136; P.L.149-1997, SEC.7; P.L.22-1999, SEC.4; P.L.200-2001, SEC.2.

Note: See also following version of this section amended by P.L.203-2001, SEC.3.

IC 25-1-9-4b Professional standards; types of conduct prohibited; certified copy of record as conclusive evidence

Note: This version of section amended by P.L.203-2001, SEC.3. See also preceding version of this section amended by P.L.200-2001, SEC.2.

Sec. 4. (a) A practitioner shall conduct the practitioner's practice in accordance with the standards established by the board regulating the profession in question and is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds:

- (1) a practitioner has:

(A) engaged in or knowingly cooperated in fraud or material deception in order to obtain a license to practice;

(B) engaged in fraud or material deception in the course of professional services or activities; or

(C) advertised services in a false or misleading manner;

(2) a practitioner has been convicted of a crime that has a direct bearing on the practitioner's ability to continue to practice competently;

(3) a practitioner has knowingly violated any state statute or rule, or federal statute or regulation, regulating the profession in question;

- (4) a practitioner has continued to practice although the

practitioner has become unfit to practice due to:

(A) professional incompetence that:

(i) may include the undertaking of professional activities that the practitioner is not qualified by training or experience to undertake; and

(ii) does not include activities performed under IC 16-21-2-9;

(B) failure to keep abreast of current professional theory or practice;

(C) physical or mental disability; or

(D) addiction to, abuse of, or severe dependency upon alcohol or other drugs that endanger the public by impairing a practitioner's ability to practice safely;

(5) a practitioner has engaged in a course of lewd or immoral conduct in connection with the delivery of services to the public;

(6) a practitioner has allowed the practitioner's name or a license issued under this chapter to be used in connection with an individual who renders services beyond the scope of that individual's training, experience, or competence;

(7) a practitioner has had disciplinary action taken against the practitioner or the practitioner's license to practice in any other state or jurisdiction on grounds similar to those under this chapter;

(8) a practitioner has diverted:

(A) a legend drug (as defined in IC 16-18-2-199); or

(B) any other drug or device issued under a drug order (as defined in IC 16-42-19-3) for another person;

(9) a practitioner, except as otherwise provided by law, has knowingly prescribed, sold, or administered any drug classified as a narcotic, addicting, or dangerous drug to a habitue or addict;

(10) a practitioner has failed to comply with an order imposing a sanction under section 9 of this chapter; or

(11) a practitioner who is a participating provider of a health maintenance organization has knowingly collected or attempted to collect from a subscriber or enrollee of the health maintenance organization any sums that are owed by the health maintenance organization.

(b) A certified copy of the record of disciplinary action is conclusive evidence of the other jurisdiction's disciplinary action under subsection (a)(7).

As added by P.L.152-1988, SEC.1. Amended by P.L.2-1993, SEC.136; P.L.149-1997, SEC.7; P.L.22-1999, SEC.4; P.L.203-2001, SEC.3.

Note: See also preceding version of this section amended by P.L.200-2001, SEC.2.

IC 25-1-9-5 Optometrists; sanctions; prohibited employment

Sec. 5. In addition to section 4 of this chapter, a practitioner licensed to practice optometry is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds a practitioner has accepted employment to practice optometry from a person other than:

(1) a corporation formed by an optometrist under IC 23-1.5; or

(2) an individual who is licensed as an optometrist under this article and whose legal residence is in Indiana.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-6 Veterinarians or veterinary technicians; sanctions; cruelty to animals

Sec. 6. In addition to section 4 of this chapter, a practitioner licensed to practice veterinary medicine or registered as a veterinary technician is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds a practitioner has engaged in cruelty to animals.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-6.5 Waiver of deductible or a copayment

Sec. 6.5. (a) In addition to section 4 of this chapter, a practitioner licensed to practice chiropractic is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board regulating the profession finds a practitioner has:

(1) waived a payment of a deductible or a copayment required to be made to the practitioner by a patient under the patient's insurance or health care plan; and

(2) advertised the waiver of a payment described in subdivision (1).

(b) This section does not apply to the waiver of a deductible or a copayment by a practitioner if:

(1) the practitioner determines chiropractic service is necessary for the immediate health and welfare of a patient;

(2) the practitioner determines the payment of a deductible or a copayment would create a substantial financial hardship for the patient; and

(3) the waiver is based on the evaluation of the individual patient and is not a regular business practice of the practitioner.

As added by P.L.151-1989, SEC.9.

IC 25-1-9-6.7 Additional professional standards for licensees under IC 25-23.6

Sec. 6.7. In addition to the actions listed under section 4 of this chapter that subject a practitioner to the exercise of disciplinary sanctions, a practitioner who is licensed under IC 25-23.6 is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board regulating the profession finds that the practitioner has:

(1) performed any therapy that, by the prevailing standards of the mental health professions in the community where the services were provided, would constitute experimentation on human subjects, without first obtaining full, informed, and written consent;

(2) failed to meet the minimum standards of performance in professional activities when measured against generally prevailing peer performance in professional activities, including the undertaking of activities that the practitioner is not qualified by training or experience to undertake;

(3) performed services, including any duties required of the individual under IC 31, in reckless disregard of the best interests of a patient, a client, or the public;

(4) without the consent of the child's parent, guardian, or custodian, knowingly participated in the child's removal or precipitated others to remove a child from the child's home unless:

(A) the child's physical health was endangered due to injury as a result of the act or omission of the child's parent, guardian, or custodian;

(B) the child had been or was in danger of being a victim of an offense under IC 35-42-4, IC 35-45-4-1, IC 35-45-4-2, IC 35-46-1-3, IC 35-49-2-2, or IC 35-49-3-2; or

(C) the child was in danger of serious bodily harm as a result of the inability, refusal, or neglect of the child's parent, guardian, or custodian to supply the child with necessary food, shelter, or medical care, and a court order was first obtained;

(5) willfully made or filed a false report or record, failed to file a report or record required by law, willfully impeded or obstructed the filing of a report or record, or induced another individual to:

(A) make or file a false report or record; or

(B) impede or obstruct the filing of a report or record;

or

(6) performed a diagnosis (as defined in IC 25-22.5-1-1.1(c));

(7) provided evidence in an administrative or judicial proceeding that had insufficient factual basis for the conclusions rendered by the practitioner;

(8) willfully planted in the mind of the patient suggestions that are not based in facts known to the practitioner; or

(9) performed services outside of the scope of practice of the license issued under IC 25-23.6.

As added by P.L.147-1997, SEC.11. Amended by P.L.2-1998, SEC.65.

IC 25-1-9-6.9 Additional professional standards; failure to provide information; providing false information

Sec. 6.9. In addition to the actions listed under section 4 of this chapter that subject a practitioner to disciplinary sanctions, a practitioner is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds that the practitioner has:

(1) failed to provide information requested by the bureau; or

(2) knowingly provided false information to the bureau; for a provider profile required under IC 25-1-5-10.

As added by P.L.211-2001, SEC.2.

IC 25-1-9-7 Physical or mental examinations

Sec. 7. The board may order a practitioner to submit to a reasonable physical or mental examination if the practitioner's physical or mental capacity to practice safely is at issue in a disciplinary proceeding.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-8 Failure to submit to examination; summary suspension

Sec. 8. Failure to comply with a board order to submit to a physical or mental examination makes a practitioner liable to summary suspension under section 10 of this chapter. *As added by P.L.152-1988, SEC.1.*

IC 25-1-9-9 Sanctions; modification or withdrawal of probation

Sec. 9. (a) The board may impose any of the following sanctions, singly or in combination, if it finds that a practitioner is subject to disciplinary sanctions under section 4, 5, 6, 7, or 6.9 of this chapter or IC 25-1-5-4:

(1) Permanently revoke a practitioner's license.

(2) Suspend a practitioner's license.

(3) Censure a practitioner.

(4) Issue a letter of reprimand.

(5) Place a practitioner on probation status and require the practitioner to:

(A) report regularly to the board upon the matters that are the basis of probation;

(B) limit practice to those areas prescribed by the board;

(C) continue or renew professional education under a preceptor, or as otherwise directed or approved by the board, until a satisfactory degree of skill has been attained in those areas that are the basis of the probation; or

(D) perform or refrain from performing any acts, including community restitution or service without compensation, that the board considers appropriate to the public interest or to the rehabilitation or treatment of the practitioner.

(6) Assess a fine against the practitioner in an amount not to exceed one thousand dollars (\$1,000) for each violation listed in section 4 of this chapter, except for a finding of incompetency due to a physical or mental disability. When imposing a fine, the board shall consider a practitioner's ability to pay the amount assessed. If the practitioner fails to pay the fine within the time specified by the board, the board may suspend the practitioner's license without additional proceedings. However, a suspension may not be imposed if the sole basis for the suspension is the practitioner's inability to pay a fine.

(b) The board may withdraw or modify the probation under subsection (a)(5) if it finds, after a hearing, that the deficiency that required disciplinary action has been remedied, or that changed circumstances warrant a modification of the order.

As added by P.L.152-1988, SEC.1. Amended by P.L.48-1991, SEC.21; P.L.22-1999, SEC.5; P.L.32-2000, SEC.10; P.L.211-2001, SEC.3.

IC 25-1-9-10 Summary suspension of license; opportunity to be heard

Sec. 10. (a) The board may summarily suspend a practitioner's license for ninety (90) days before a final adjudication or during the appeals process if the board finds that a practitioner represents a clear and immediate danger to the public health and safety if the practitioner is allowed to continue to practice. The summary suspension may be renewed upon a hearing before the board, and each renewal may be for ninety (90) days or less.

(b) Before the board may summarily suspend a license that has been issued under IC 15-5-1.1, IC 25-22.5 or IC 25-14, the consumer protection division of the attorney general's office shall make a reasonable attempt to notify a practitioner of a hearing by the board to suspend a practitioner's license and of information regarding the allegation against the practitioner. The consumer protection division of the attorney general's office shall also notify the practitioner that the practitioner may provide a written or an oral statement to the board on the practitioner's behalf before the board issues an order for summary suspension. A reasonable attempt to reach the practitioner is made if the consumer protection division of the attorney general's office attempts to reach the practitioner by telephone or facsimile

at the last telephone number of the practitioner on file with the board.

(c) After a reasonable attempt is made to notify a practitioner under subsection (b):

(1) a court may not stay or vacate a summary suspension of a practitioner's license for the sole reason that the practitioner was not notified; and

(2) the practitioner may not petition the board for a delay of the summary suspension proceedings.

As added by P.L.152-1988, SEC.1. Amended by P.L.43-1995, SEC.2; P.L.71-2000, SEC.18.

IC 25-1-9-10.1 Retention of clinical consultants and experts to advise on suspension

Sec. 10.1. The attorney general may retain the services of a clinical consultant or an expert to provide the attorney general with advice concerning the acts that are the subject of a suspension under this chapter.

As added by P.L.43-1995, SEC.3.

IC 25-1-9-11 Reinstatement of suspended license

Sec. 11. The board may reinstate a license which has been suspended under this chapter if, after a hearing, the board is satisfied that the applicant is able to practice with reasonable skill and safety to the public. As a condition of reinstatement, the board may impose disciplinary or corrective measures authorized under this chapter.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-12 Reinstatement of revoked license

Sec. 12. The board may not reinstate a license that has been revoked under this chapter. An individual whose license has been revoked under this chapter may not apply for a new license until seven (7) years after the date of revocation.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-13 Consistency in application of sanctions

Sec. 13. The board shall seek to achieve consistency in the application of the sanctions authorized in this section. Significant departures from prior decisions involving similar conduct must be explained in the board's findings or orders.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-14 Surrender of license

Sec. 14. A practitioner may petition the board to accept the surrender of the practitioner's license instead of a hearing before the board. The practitioner may not surrender the practitioner's license without the written approval of the board, and the board may impose any conditions appropriate to the surrender or reinstatement of a surrendered license.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-15 Costs of disciplinary proceeding; payment; limitations

Sec. 15. Practitioners who have been subjected to disciplinary sanctions may be required by a board to pay for the costs of the proceeding. The practitioner's ability to pay shall be considered when costs are assessed. If the practitioner fails to pay the costs, a suspension may not be imposed solely upon the practitioner's inability to pay the amount assessed. These costs are limited to costs for the

following:

- (1) Court reporters.
- (2) Transcripts.
- (3) Certification of documents.
- (4) Photoduplication.
- (5) Witness attendance and mileage fees.
- (6) Postage.
- (7) Expert witnesses.
- (8) Depositions.
- (9) Notarizations.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-16 Refusal of licensure or grant of probationary license

Sec. 16. (a) The board may refuse to issue a license or may issue a probationary license to an applicant for licensure if:

(1) the applicant has been disciplined by a licensing entity of another state or jurisdiction, or has committed an act that would have subjected the applicant to the disciplinary process had the applicant been licensed in Indiana when the act occurred; and

(2) the violation for which the applicant was, or could have been, disciplined has a direct bearing on the applicant's ability to competently practice in Indiana.

(b) Whenever the board issues a probationary license, the board may impose one (1) or more of the following conditions:

(1) Report regularly to the board upon the matters that are the basis of the discipline of the other state or jurisdiction.

(2) Limit practice to those areas prescribed by the board.

(3) Continue or renew professional education.

(4) Engage in community restitution or service without compensation for a number of hours specified by the board.

(5) Perform or refrain from performing an act that the board considers appropriate to the public interest or to the rehabilitation or treatment of the applicant.

(c) The board shall remove any limitations placed on a probationary license under this section if the board finds after a hearing that the deficiency that required disciplinary action has been remedied.

As added by P.L.33-1993, SEC.15. Amended by P.L.32-2000, SEC.11.

IC 25-1-9-17 Applicant appearance before board or controlled substances advisory committee

Sec. 17. The board and the controlled substances advisory committee (IC 35-48-2-1) may require an applicant for licensure to appear before the board or committee before issuing a license.

As added by P.L.33-1993, SEC.16.

IC 25-1-9-18 Fitness determination of health care provider; filing of complaint

Sec. 18. (a) If the insurance commissioner forwards to the board the name of a practitioner under IC 34-18-9-4(a) (or IC 27-12-9-4(a) before its repeal), the board shall consider whether:

(1) the practitioner has become unfit to practice under section 4 of this chapter; and

(2) a complaint should be filed under IC 25-1-7-4.

(b) If the board determines that a complaint should be filed under subsection (a), the board must report to the consumer protection division whether the board will schedule the matter:

(1) for informal negotiation under IC 25-1-7-6;

(2) on the board's agenda for a vote requesting that the attorney general prosecute the matter before the board under IC 25-1-7-7; or

(3) on the board's agenda for a vote on summary suspension of the practitioner's license pending prosecution of the matter before the board under IC 25-1-7-7.

(c) A board may designate a board member or staff member to act on behalf of the board under this section.

As added by P.L.43-1995, SEC.4. Amended by P.L.1-1998, SEC.131.

TITLE 848 INDIANA STATE BOARD OF NURSING

RULES

NOTE: Originally adopted by the Board of Nurses' Registration and Nursing Education. Name changed by P.L.169-1985, SECTION 67 (IC 25-23-1-2), effective July 1, 1985.

ARTICLE 1. REGISTERED NURSES AND PRACTICAL NURSES

Rule 1. Definitions; Administration

848 IAC 1-1-1 Evaluation of credentials *(Repealed)*

Sec. 1. (Repealed by Indiana State Board of Nursing; filed Mar 18, 1980, 4:00 pm: 3 IR 964)

848 IAC 1-1-2 Definitions *(Repealed)*

Sec. 2. (Repealed by Indiana State Board of Nursing; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4534)

848 IAC 1-1-2.1 Definitions

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1

Sec. 2.1. The following definitions apply throughout this article:

(1) "Approved" or "accredited", terms used interchangeably, means those programs that have met requirements of the board. The term also includes approval granted by voluntary, regional, and other state agencies.

(2) "Associate degree program" means a program leading to an associate degree in nursing, conducted by an educational unit in nursing, within the structure of a college or university.

(3) "Audit" means attending a class or course without receiving credit.

(4) "Baccalaureate degree program" means a program leading to a baccalaureate degree in nursing, conducted by an educational unit in

nursing within the structure of a senior college or university.

(5) "Board" means the Indiana state board of nursing.

(6) "Clinical laboratory experience" means the learning experiences provided in facilities appropriate to the curriculum objectives.

(7) "Clinical preceptor" means an individual employed by the cooperating agency who also has the responsibility to supervise a student in the clinical facility.

(8) "Controlling organization" means the agency which assumes the responsibility for overall administration of the program.

(9) "Cooperating agency" means an institution which cooperates with the nursing program to provide facilities for the clinical laboratory experiences of students.

(10) "Curriculum" means the whole body of courses offered in the nursing program.

(11) "Diploma program" means a program leading to a diploma in nursing, conducted by a school under the control of a hospital.

(12) "Director" means the registered nurse who is delegated responsibility for the implementation and administration of the nursing program regardless of the official title in any specific institution.

(13) "Enroll" means attending a class or course for the purpose of receiving credit.

(14) "Faculty" means individuals employed to administer and to teach in the educational program.

(15) "Failure rate" is calculated on the number of first time candidates who fail to be licensed and is computed annually from April 1 through March 31.

(16) "May" indicates discretionary use.

(17) "Practical nursing program" means a program leading to a diploma or certificate in practical nursing, conducted by an educational institution or hospital.

(18) "Program" means the curriculum and all the supporting activities organized independently, under an educational institution or hospital, to prepare students for nursing licensure and the practice of nursing.

(19) "Rate of successful completion" means the annual number of first time candidates who successfully complete the National Council Licensure examination and is computed annually from April 1 through March 31.

(20) "Rule" or "requirement" means a mandatory standard which a program shall meet in order to be accredited.

(21) "Shall" indicates a mandatory rule, regulation, or requirement.

(22) "Should" indicates a recommendation.

(23) "Survey visit" means an on-site visit of a nursing program, including clinical facilities by a designated representative of the board for the purpose of evaluating the program of learning.

(Indiana State Board of Nursing; 848 IAC 1-1-2.1; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4525; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-1-3 Accreditation (Repealed)

Sec. 3. (Repealed by Indiana State Board of Nursing; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4534)

848 IAC 1-1-4 Criteria for accreditation (Repealed)

Sec. 4. (Repealed by Indiana State Board of Nursing; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4534)

848 IAC 1-1-5 Appeals

Authority: IC 25-23-1-7

Affected: IC 4-21.5

Sec. 5.. Appeals before the Indiana state board of nursing are governed by the Indiana Administrative Orders and Procedures Act (AOPA) under IC 4-21.5. *(Indiana State Board of Nursing; Reg 5; filed Jul 18, 1977, 8:55 a.m.: Rules and Regs. 1978, p. 611; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1326)*

848 IAC 1-1-6 Licensure by examination

Authority: IC 25-23-1-7

Affected: IC 25-23-1-11; IC 25-23-1-12

Sec. 6. (a) Any person who makes application to the board for a license shall submit to the board written evidence, verified by oath, that the registered nurse applicant meets IC 25-23-1-11 and the licensed practical nurse applicant meets IC 25-23-1-12.

(b) A copy of a marriage certificate or court order shall be submitted by a candidate who wishes to change her/his name after the application is filed.

(c) Candidates shall present the authorization to test and a photo identification for entrance to the testing center.

(d) The required Indiana passing criteria for the licensure examination is set by the National Council of State Boards of Nursing using the computerized adaptive testing methodology.

(e) An applicant may take the examination at any testing center in the United States approved by the National Council for State Boards of Nursing. An authorization to test must be provided by the Indiana board prior to testing.

(f) Graduates of foreign schools of nursing shall meet the following qualifications before being licensed in Indiana:

- (1) Be licensed in the territory or country in which they graduated.
- (2) Meet the qualifications required in Indiana as determined by the board.
- (3) Obtain the official records from the territory or country in which the applicant graduated verifying academic qualifications, or be referred to state accredited nursing programs to establish the necessary credits if the original records are unobtainable.

(4) Show evidence of having passed the examination prepared by the commission on graduates of foreign nursing schools.

(5) Pass the appropriate nurse licensing examination in Indiana.

(g) Requirements for unsuccessful candidates are as follows:

(1) Any candidate who fails the Indiana licensing examination shall not be licensed until she or he has passed the licensing examination.

(2) A complete application shall be submitted each time an examination is taken.

(3) The full examination fee shall be charged for each reexamination.

(4) A candidate who has failed the licensing examination (in any jurisdiction) should undertake a special study program before retaking the examination. This study program may include one (1) or all of the following:

(A) Auditing nursing courses at an approved program in nursing.

(B) Self-study program, such as review of course work or professional reading.

(C) Tutoring.

(D) Reenrollment in a state-accredited program of nursing.

(h) Written informed consent from the candidate is necessary before individual licensing examination scores are released to anyone other than the candidate.

(i) Candidates applying for the licensing examination shall be required to meet the board's curricular requirements for the program in nursing as stated in the rules in effect at the time of their graduation. *(Indiana State Board of Nursing; Reg 6; filed Mar 1, 1978, 8:51 a.m.: Rules and Regs. 1979, p. 162; filed Mar 18, 1980, 4:00 p.m.: 3 IR 961; filed Feb 18, 1982, 2:18 p.m.: 5 IR 735; filed Mar 29, 1985, 10:43 a.m.: 8 IR 1026; filed Sep 12, 1985, 3:27 p.m.: 9 IR 287; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1326)*

848 IAC 1-1-7 Licensure by endorsement

Authority: IC 25-23-1-7

Affected: IC 25-23-1-11; IC 25-23-1-12

Sec. 7. (a) An applicant who was originally licensed by the National Council Licensing Examination (NCLEX®) or an equivalent examination in another jurisdiction will be accepted for registration in Indiana by endorsement from the board that granted the original license if the applicant meets the following qualifications:

(1) Is of good moral character.

(2) Has graduated from high school or the equivalent thereof.

(3) Has graduated from a state approved program in nursing.

(b) Applicants who are graduates of foreign schools of nursing are eligible for Indiana licensure by endorsement providing the following conditions are met:

(1) Have written and passed the National Council Licensing Examination (NCLEX®) or an

equivalent examination in another jurisdiction or country.

(2) Have achieved Indiana's passing scores in all areas.

(3) Submit copies of all scholastic records.

(4) Submit proof of good moral character.

(5) Submit proof of high school graduation or equivalent thereof.

(6) Submit proof of having graduated from a program in nursing with concurrent theory and clinical experience in all areas.

(c) The completed application accompanied by the fee, photograph, and proof of current licensure in another jurisdiction shall be submitted to the Indiana board of nursing. The fee is nonrefundable. (*Indiana State Board of Nursing; Reg 7; filed Mar 1, 1978, 8:51 a.m.: Rules and Regs. 1979, p. 165; filed Mar 18, 1980, 4:00 p.m.: 3 IR 963; filed Mar 29, 1985, 10:43 a.m.: 8 IR 1028; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1327*)

848 IAC 1-1-8 Renewal of license

Authority: IC 25-23-1-7

Affected: IC 25-23-1-16.1

Sec. 8. (8.1) The application form and instructions for renewal of the license to practice nursing will be mailed in odd numbered years to registered nurse licensees and in even numbered years to practical nurse licensees.

(8.2) Applicants for renewal of license shall pay a renewal fee.

(8.3) Applications for renewal shall be mailed to the last known address of the licensee. Failure to receive the application for renewal shall not relieve the licensee of the responsibility for renewing the license by the renewal date. (*Indiana State Board of Nursing; Reg 8; filed Mar 1, 1978, 8:51 am: Rules and Regs. 1979, p. 166; filed Mar 29, 1985, 10:43 am: 8 IR 1028; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 1-1-9 Inactive status (Repealed)

Sec. 9. (*Repealed by Indiana State Board of Nursing; filed Dec 19, 1996, 10:00 a.m.: 20 IR 1122*)

848 IAC 1-1-10 Duplicate license

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7; IC 25-23-1-16.1

Sec. 10. (a) The licensee shall report, in writing, on the form supplied by the board, the loss of the original certificate of licensure or the biennial renewal license.

(b) A license that has been lost or destroyed shall be replaced upon proper identification of the registrant.

(*Indiana State Board of Nursing; Reg 10; filed Mar 1, 1978, 8:51 a.m.: Rules and Regs. 1979, p. 166; filed Mar 29, 1985, 10:43 a.m.: 8 IR 1028; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1328*)

848 IAC 1-1-11 Name change

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7; IC 25-23-1-16.1

Sec. 11. CHANGE OF NAME. (11.1) If a change of name is requested, licensee shall submit a copy of a marriage certificate or court order. Licensees may maintain the legal name of preference. (*Indiana State Board of Nursing; Reg 11; filed Mar 1, 1978, 8:51 am: Rules and Regs. 1979, p. 166; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 1-1-12 Failure to renew license; reinstatement (Repealed)

Sec. 12. (*Repealed by Indiana State Board of Nursing; filed Dec 19, 1996, 10:00 a.m.: 20 IR 1122*)

848 IAC 1-1-13 Employment conditions; enforcement powers and duties; records and reports

Authority: IC 25-23-1-7

Affected: IC 4-1-6; IC 25-23-1-7;

IC 25-23-1-16.1

Sec. 13. Any person who practices or offers to practice nursing as either a registered or licensed practical nurse in Indiana shall hold a current Indiana license as proof of their legal authorization to practice.

(b) The Indiana board of nursing (board) shall be responsible for the following:

(1) The verification of licensure of nurses to employers of nurses.

(2) Initiating appropriate action as authorized by the Nurse Practice Act under IC 25-23-1 on reports to the board concerning incidents involving a licensee that may be cause for disciplinary action.

(3) Assuring that imposters are not functioning in roles normally assumed by the licensed nurse.

(4) Carrying out the duties of the board in compliance with the Fair Information Practice Act under IC 4-1-6.

(*Indiana State Board of Nursing; Reg 13; filed Mar 1, 1978, 8:51 a.m.: Rules and Regs. 1979, p. 167; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1328*)

848 IAC 1-1-14 Fees

Authority: IC 25-1-8-2; IC 25-23-1-7

Affected: IC 25-23-1

Sec. 14. (a) The fee for licensure by examination shall be a cost equal to the fee charged by the national provider of the exam and an additional administrative fee of fifty dollars (\$50) for the registered nurse examination or fifty dollars (\$50) for the practical nurse examination.

(b) The fee for licensure by endorsement shall be fifty dollars (\$50).

(c) The fee for endorsement out of Indiana shall be ten dollars (\$10).

(d) The fee for licensure renewal shall be a total of fifty dollars (\$50) for the biennium or any part thereof, three dollars (\$3) of which will go toward the funding of the impaired nurses program.

(e) The penalty fee for for [*sic.*] late renewals is as established by the health professions bureau.

(f) The fee for a temporary permit to practice nursing as an applicant awaiting licensure by endorsement, pursuant to IC 25-23-1-10.5, shall be ten dollars (\$10).

(g) The fee for a duplicate wall certificate shall be ten dollars (\$10). (*Indiana State Board of Nursing; 848 IAC 1-1-14; filed Mar 29, 1985, 10:43 a.m.: 8 IR 1028; filed Sep 12, 1985, 3:29 p.m.: 9 IR 289; filed Jun 6, 1996, 9:00 a.m.: 19 IR 3105; readopted filed Jul 30, 2001, 2:07 p.m.: 24 IR 4201*)

848 IAC 1-1-15 Temporary permits

Authority: IC 25-23-1-7

Affected: IC 25-23-1-11;
IC 25-23-1-12

Sec. 15. (a) The board may issue a temporary permit to practice nursing to an applicant awaiting licensure by endorsement providing the following conditions are met:

(1) The applicant meets the requirements for licensure pursuant to IC 25-23-1-11 or IC 25-23-1-12.

(2) A completed application for licensure by endorsement is submitted.

(3) Proof of current licensure in another state is submitted.

(4) The fee for licensure by endorsement is submitted.

(5) The application for temporary permit is submitted.

(6) The fee for temporary permit is submitted.

(b) The temporary permit will be valid for sixty (60) days after issuance or until notice of denial of licensure by the board. (*Indiana State Board of Nursing; 848 IAC 1-1-15; filed Sep 12, 1985, 3:29 p.m.: 9 IR 289; filed Dec 19, 1996, 11:00 a.m.: 20 IR 1122; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

Rule 2. Accreditation

848 IAC 1-2-1 Opening a program

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 1. (a) A controlling organization wishing to open a state accredited nursing program shall submit a letter of intent to the board six (6) to twelve (12) months prior to anticipated opening date.

(b) The controlling organization shall submit documented evidence of resources and needs necessary to start a program. This documentation shall include the following:

(1) Availability of qualified faculty.

(2) Budgeted faculty positions.

(3) Expansion plans of existing programs within a fifty (50) mile radius.

(4) Nursing manpower studies documenting the need for the program.

(5) Availability of adequate clinical facilities for the program.

(6) Availability of adequate academic facilities for the program.

(7) Evidence of financial resources adequate for the planning, implementation, and continuation of the program.

(c) The board shall meet with representatives of the controlling organization for review of documented evidence of need.

(d) The board requires that a program in nursing in a state assisted college or university be authorized by the Indiana commission for higher education.

(e) The controlling organization shall submit a completed application on forms provided by the board and shall request a hearing with the board.

(f) Prior to the hearing, the proposed program site shall be visited by a representative of the board and by a survey visitor appointed by the board. The visitors shall meet with administrative personnel of the controlling institution and shall examine the academic and clinical facilities in terms of appropriateness for the implementation of the proposed program in nursing.

(g) After the hearing with the controlling organization, the board shall approve or disapprove the application upon evidence:

(1) submitted in the application;

(2) presented at the hearing; and

(3) collected on the survey visit.

(h) If the program is approved, the board shall stipulate the following:

(1) The maximum class size for the first year.

(2) The maximum number of classes to be admitted during the first year.

(3) Approved clinical facilities for the first year.

(4) The number and qualifications of nursing faculty.

A second site visit shall be made by a representative of the board and by a survey visitor appointed by the board at the end of the first year of the operation of the new program and again prior to granting full accreditation. (*Indiana State Board of Nursing; 848 IAC 1-2-1; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4526; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 1-2-2 Closing a program

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 2. (a) Within thirty (30) days of a decision to close a state accredited nursing program, the controlling organization shall send a written notice to the board.

(b) The minimum legal standards for accreditation shall be maintained until the last student completes or leaves the program.

(c) The controlling organization shall be responsible for assisting students to transfer to accredited programs.

(d) The controlling organization shall provide for the safekeeping and accessibility of the program records of former students and graduates of the program. Plans for future custody of the records shall be documented in writing to the board. (*Indiana State Board of Nursing; 848 IAC 1-2-2; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4527; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 1-2-3 Purpose for accreditation**Authority: IC 25-23-1-7****Affected: IC 25-23-1-7**

Sec. 3. The purpose for accreditation shall be as follows:

- (1) To ensure the safe practice of nursing by setting legal standards for the programs preparing the practitioner.
- (2) To certify minimal educational standards and practices for the preparation of:
 - (A) registered nurses; and
 - (B) licensed practical nurses.
- (3) To assist in developing the programs of nursing education in accordance with sound social, educational, and professional principles.
- (4) To ensure continuous evaluation and improvement of educational programs in nursing.
- (5) To keep the public informed by publishing a list of the institutions that conduct accredited programs of nursing education.

(Indiana State Board of Nursing; 848 IAC 1-2-3; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4527; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-4 Eligible programs**Authority: IC 25-23-1-7****Affected: IC 25-23-1-7**

Sec. 4. Eligible programs for purposes of accreditation shall be as follows:

- (1) Registered nurse programs that prepare students for registered nurse licensure. The program shall award an associate's degree in nursing or a baccalaureate degree with a major in nursing or a diploma in nursing.
- (2) Practical nursing programs that prepare students for practical nurse licensure. The program shall award a diploma or certificate in practical nursing.

(Indiana State Board of Nursing; 848 IAC 1-2-4; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4527; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-5 Accreditation status**Authority: IC 25-23-1-7****Affected: IC 25-23**

Sec. 5. (a) Initial accreditation shall be granted to a new program that meets the regulations for opening a nursing program until the first class graduates.

(b) Full accreditation shall be granted to a program following the initial accreditation, providing it meets the regulations for Indiana accredited programs in nursing. Accreditation status shall be communicated to the program.

(c) Conditional accreditation shall be granted to a program that fails to maintain the legal requirements for accreditation. Written notification from the board shall specify a definite amount of time that will be given for the program to meet this article. The major outcome criteria indicating a program's successful attainment of state standards is the first time candidate's successful completion

of the National Council Licensure examination. If a school's annual rate of successful completion of the National Council Licensure examination is lower than the national total percentage passing for the second consecutive year, the school shall submit a report to the board outlining the following:

- (1) Results of the faculty's review of factors that may have contributed to the low pass rate, including, but not limited to, the following:
 - (A) Curriculum content.
 - (B) Curriculum design.
 - (C) Outcome evaluation.
 - (D) Admission.
 - (E) Progression.
 - (F) Graduation policies.
- (2) The faculty's plan for correcting any problems identified.

(d) If the program's annual rate of successful completion of the National Council Licensure examination is lower than the national total percentage passing for the third consecutive year, the board shall send a surveyor to review the program's ability to comply with this article. After a hearing, the board shall determine the accreditation status and specify a correction plan if needed. At any point, the board may survey the program to determine whether the program shall be permitted to continue to admit students or continue to operate. The program shall have the burden of proving, with clear and convincing evidence, that the program is able to comply with IC 25-23 and this title.

(e) Withdrawal of accreditation shall occur if the program fails to prove compliance with IC 23-25 *[sic., IC 25-23]* and this title. The program shall be given an opportunity for a hearing before accreditation is withdrawn, and the school shall be visited by a representative of the board. The program shall assist students in transferring to accredited programs. A school with accreditation that has been withdrawn may apply for reinstatement by following the procedure established in section 1 of this rule. *(Indiana State Board of Nursing; 848 IAC 1-2-5; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4527; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 1-2-6 Survey visits**Authority: IC 25-23-1-7****Affected: IC 25-23-1-21**

Sec. 6. (a) All schools with full accreditation status shall be visited at regular intervals as determined by the board. The survey visitor(s) shall evaluate the program's ability to meet the requirements of this article and prepare a written report for review and action by the board. Visits shall be conducted under impartial and objective conditions.

(b) The written report of the survey visit to the educational program is submitted to the director for review to permit comments for clarification by the director prior to board action.

(c) The final survey report accompanied by a written report of board action shall be sent to the administrative officer of the controlling agency. A copy shall be sent simultaneously to the director of the program.

(d) An institution used as a clinical laboratory for students may be visited by a representative or representatives of the board as part of the school survey.

(e) In lieu of a regular cycle survey visit, the board may elect to accept the results of an accreditation survey visit by the National League for Nursing Accrediting Commission or the Commission on Collegiate Nursing Education. The program of nursing shall file:

- (1) the report of the visitors;
- (2) the response by the program to the survey visitors; and
- (3) the report of the action taken by the National League for Nursing Accrediting Commission or the Commission on Collegiate Nursing Education.

(Indiana State Board of Nursing; 848 IAC 1-2-6; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4528; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-7 Eligible institutions

Authority: IC 25-23-1-7

Affected: IC 25-23-1-20

Sec. 7. (a) The program in nursing shall be incorporated or be a part of an incorporated institution.

(b) Educational institutions, colleges, or universities conducting a nursing program or with which a school of nursing is affiliated shall be accredited by the North Central Association of Colleges and Secondary Schools or the Indiana commission on proprietary education. Hospitals conducting a nursing program shall be accredited by the Joint Commission on Accreditation of Healthcare Organizations. Long term care facilities shall be licensed by the Indiana state department of health.

(c) The philosophy and purposes of the program in nursing shall be in accordance with this rule.

(d) There shall be assurance that the program can meet the requirements for Indiana accredited programs in nursing. *(Indiana State Board of Nursing; 848 IAC 1-2-7; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4528; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 1-2-8 Change of ownership or control

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 8. (a) The board shall be notified in writing of any changes in ownership or control of a school.

(b) Information shall include the following:

- (1) The official name of the school.
- (2) The organizational chart of the contracting agency.
- (3) Names of administrative officials.

(c) The new controlling organization shall submit any change in curriculum to the board for approval six (6) months prior to implementation. *(Indiana State Board of Nursing; 848 IAC 1-2-8; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4528; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 1-2-9 Philosophy, purpose, and objective

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 9. The philosophy, purpose, and objective of the program in nursing shall be:

- (1) clearly defined in writing in the official records;
- (2) consistent with the philosophy of the controlling institution;
- (3) formulated and accepted by the faculty;
- (4) inclusive of program beliefs regarding education, nursing, and the learning process;
- (5) descriptive of the practitioner to be prepared;
- (6) the basis for planning, implementing, and evaluating the total program; and
- (7) reviewed periodically and revised as necessary by the nursing faculty.

(Indiana State Board of Nursing; 848 IAC 1-2-9; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4529; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-10 Organization and administration

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 10. (a) Responsibility for developing and implementing the program in nursing shall be placed in the faculty of the nursing education unit.

(b) The institution shall have an effective plan of organization and administration appropriate to the purpose and implementation of the instructional program in nursing. There shall be an organizational chart of the:

- (1) institution indicating the place of the nursing program; and
- (2) nursing program.

(c) There shall be a controlling body that recognizes the program in nursing as an educational program and delegates authority to the chief administrative officer of the institution who, in turn, delegates authority to the nurse administrator responsible for the program.

(d) When a program director resigns, it is the responsibility of the administration of the controlling organization to inform the board in writing of:

- (1) the intended resignation;
- (2) the effective date; and
- (3) the plans for filling the position;

within thirty (30) days of the resignation.

(e) The program in nursing shall be assured of stable, financial resources adequate for and effectively allocated to support its educational activities. There shall be a budget prepared in accordance with sound educational and financial practices. The financial statement shall give a clear picture of the status of the program. The nurse administrator, with documentation of faculty input, shall have the following responsibilities relating to the financial operation of the program in nursing:

- (1) Preparing the budget for one (1) year in advance of the fiscal period and recommending it to the proper authorities.
- (2) Controlling the use of the approved budget through an accurate system of records.
- (3) Reviewing financial reports routinely and making necessary revisions.

- (4) Consulting with proper authorities within the institution in regard to interpretation, preparation, and implementation of the budget.

(Indiana State Board of Nursing; 848 IAC 1-2-10; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4529; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-11 Admissions

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 11. (a) There shall be published policies for admission established by the nursing faculty.

(b) Students shall be selected on the basis of established criteria and in compliance with all applicable state and federal laws.

(c) There shall be well defined written policies governing payment and refund of tuition and other fees.

(d) The number of students admitted to a nursing education program shall be determined by the following:

- (1) The number of qualified faculty.
- (2) The availability of the following:
 - (A) Adequate educational facilities and resources.
 - (B) Appropriate clinical learning activities.

(e) An applicant shall be graduated from a state approved high school or its equivalent. A complete high school transcript shall be on file.

(f) A person who has qualified for equivalency to high school graduation on the basis of satisfactory completion of the general equivalency degree test (GED) shall be eligible for entrance to an Indiana accredited program in nursing upon proof of the following:

- (1) A copy of the test results listing individual and total scores on the GED test shall be on file to validate satisfactory test completion.
- (2) Satisfactory completion of college courses relevant to nursing may nullify unsatisfactory test scores.

(g) There shall be written policies regarding the following:

- (1) The readmission of a student who:
 - (A) withdrew from the program; or
 - (B) failed required courses.
- (2) The admission of a transfer student.

(Indiana State Board of Nursing; 848 IAC 1-2-11; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4529; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-12 Faculty

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 12. (a) The program in nursing shall provide and maintain a qualified faculty. The general qualifications for all nurse faculty members shall include the following:

- (1) Graduation from an approved school of nursing accepted by the board.
- (2) Current, unencumbered licensure in Indiana.

(b) The personnel policies for faculty members shall be defined in writing.

(c) Faculty qualification data shall be filed on designated forms in the office of the board within thirty (30) days of the hiring date.

(d) Faculty, other than registered nurses, who teach nonclinical nursing courses, including, but not limited to:

- (1) issues and trends;
- (2) nutrition;
- (3) research;
- (4) management; and
- (5) statistics;

shall hold master's degrees in areas appropriate to the responsibilities inherent in the position.

(e) Clinical preceptorships may be used for the clinical laboratory experiences of students. When clinical preceptors are used, the following conditions shall be met:

- (1) Written agreements between cooperating agency and nursing program shall delineate the functions and responsibilities of the parties involved.
- (2) Criteria for selecting clinical preceptors shall be developed and in writing.
- (3) The clinical preceptors shall have the following minimum qualifications:
 - (A) Current licensure as a registered nurse.
 - (B) Three (3) years of experience as a registered nurse.
- (4) Written clinical objectives shall be specific and shared with the clinical preceptor prior to the experience.
- (5) The designated faculty member shall be responsible for the learning experience of each student and shall meet with each clinical preceptor and student for the purpose of monitoring and evaluating the learning experience.
- (6) The designated faculty member shall be available by phone or in person when students are in the clinical area.
- (7) A faculty member shall be responsible for coordinating the clinical preceptorship of no more than ten (10) students.

(Indiana State Board of Nursing; 848 IAC 1-2-12; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4530; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-13 Faculty qualifications; registered nurse programs

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 13. (a) The director shall be a registered nurse with a minimum of a master's degree, preferably in nursing. A doctoral degree is recommended. The director shall have experience in the following:

- (1) The practice of nursing.
- (2) Nursing education.
- (3) Administration.

The director shall be employed full time, excluding vacations and holidays, during the enrollment period of the students.

(b) The nurse faculty member shall have experience in the practice of nursing and hold a master's degree. The majority of the faculty shall hold master's degrees with majors in nursing. The remainder of the faculty shall hold master's degrees in a field appropriate to their teaching or clinical responsibilities. The majority of the faculty shall be full-time employees of the institution. Any faculty member hired in the year 2002 or beyond shall have a master's degree in nursing. The appointment of a person who does not hold a master's degree shall be made only if that person enrolls in a college or university and within five (5) years of assuming the teaching position completes a master's degree. Faculty members who have been appointed prior to the promulgation of this rule shall be expected to complete master's degrees within five (5) years. (*Indiana State Board of Nursing; 848 IAC 1-2-13; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4530; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 1-2-14 Faculty qualifications; licensed practical nurse programs

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 14. (a) The director shall be a registered nurse with a minimum of a master's degree, preferably in nursing. The director shall have experience in the following:

- (1) The practice of nursing.
- (2) Practical nursing education.
- (3) Administration.

The director shall be employed full time, excluding vacations and holidays, during the enrollment period of the students.

(b) The nurse faculty member shall have experience in the practice of nursing and hold a baccalaureate degree. The majority of the faculty shall hold baccalaureate degrees with majors in nursing. The remainder of the faculty shall hold baccalaureate degrees in a field appropriate to their teaching or clinical responsibilities. The majority of the faculty shall be full-time employees of the institution. Any faculty member hired in the year 2002 or beyond shall have a baccalaureate degree in nursing. (*Indiana State Board of Nursing; 848 IAC 1-2-14; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4530; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 1-2-15 Student personnel services

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 15. Within the framework of the controlling institution, policies regulating student personnel services shall be delineated in writing, including, but not limited to, the following:

- (1) Counseling and guidance.
- (2) Health services.
- (3) Financial aid.
- (4) Housing.
- (5) Student organization.
- (6) Job placement.
- (7) Liability insurance.

(*Indiana State Board of Nursing; 848 IAC 1-2-15; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4531; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 1-2-16 Curriculum; all programs

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 16. (a) The development, implementation, evaluation, and revision of the curriculum shall be the responsibility of the nursing faculty and shall be based on the stated philosophy and objectives of the program.

(b) The program shall provide an opportunity for the student to learn facts, principles, concepts, and skills which ensure that each graduate meets the minimal qualifications essential for safety to practice as a licensed nurse.

(c) There shall be concurrent didactic instruction and clinical laboratory experiences in the care of patients from all age groups except when students repeat courses for failing or withdrawal. Those students may repeat the failed course by itself without also repeating the concurrent course.

(d) The clinical laboratory experiences shall be determined by the philosophy and objectives of the program and shall be provided in cooperative agencies approved by the board.

(e) Classroom laboratory experiences shall be the responsibility of program faculty.

(f) Observational experiences shall be determined by the philosophy and objectives of the program. As used in this subsection, "observational experiences" means those experiences in which the student is in the role of observer. Observational experiences shall be:

- (1) planned for and guided by the faculty, but may not require direct supervision;
- (2) included in the clinical laboratory experiences; and
- (3) included in the program's annual report to the board, but do not require prior approval for implementation.

(g) There shall be an outline of the total curriculum showing the placement of courses according to:

- (1) year and semester or term;
- (2) the ratio of credits to hours; or
- (3) the total number of hours.

(h) The school year shall be divided into definite terms with dates set for the beginning and ending of each. The dates shall be communicated to the students at the beginning of the academic year.

(i) Board approval shall be granted prior to the initiation of any major curriculum change. If the change is minor, in that it does not substantially alter the curriculum, it shall be reported to the board in writing.

(j) A major change, which would require the board's approval prior to implementation, includes the following:

- (1) Major changes in philosophy, purpose, or objective.
- (2) The number of credits required for successful completion of the program or the major in nursing.

(3) The number and type of general education courses.

(4) Relocation of the program or any of its components.

(5) Addition of clinical sites.

(6) Change in required clinical laboratory hours.

(7) Increases or decreases in admission numbers by twenty-five percent (25%).

(8) Admission times.

(9) Progression options.

(10) Additions of satellite locations.

(k) A minor change, which would not require prior board approval but would be reported in the program's annual report, includes changes in the sequencing of courses or content with the current philosophy and number of credits.

(l) There shall be a systematic written plan for program evaluation that is ongoing according to the time frame specified by the faculty. The findings from the systematic evaluation shall be used for development, maintenance, and revision of the program components. The written plan shall include, but is not limited to, the following:

- (1) Philosophy, purpose, and objective of the nursing education program.
- (2) Expected knowledge, skills, and abilities of the graduates.
- (3) Teaching and learning experiences.
- (4) Student evaluation of courses.
- (5) Instructor evaluation of students.
- (6) Pass rates on licensure examination.
- (7) Follow-up studies of graduates' evaluation of the program of learning.
- (8) Employment performance of graduates.

(Indiana State Board of Nursing: 848 IAC 1-2-16; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4531; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-17 Curriculum; registered nurse programs
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 17. The curriculum shall provide instruction in the following areas:

- (1) Physical and biological sciences, including content drawn from the areas of:
 - (A) anatomy;
 - (B) physiology;
 - (C) chemistry;
 - (D) microbiology;
 - (E) pharmacology;
 - (F) physics; and
 - (G) nutrition;
 that may be integrated, combined, or presented as separate courses.
- (2) Social and behavioral sciences shall include content drawn from the areas of:
 - (A) communications;
 - (B) psychology; and
 - (C) sociology;
 that may be integrated, combined, or presented as separate courses.

(3) The nursing content shall establish the following:

- (A) Provide concurrent theory and clinical experience in the following areas:
 - (i) Adult nursing.
 - (ii) Obstetric nursing.
 - (iii) Nursing of children.
 - (iv) Psychiatric nursing.
 - (v) Geriatric nursing.
 - (vi) For baccalaureate programs, community health nursing.
- (B) Include history, trends, legal aspects, and ethical aspects of nursing that may be integrated, combined, or presented as separate courses.
- (C) Include content about chemical substance abuse among professionals.
- (D) Computer technology shall be integrated, combined, or presented as a separate course.
- (E) Universal precautions education shall be integrated, combined, or presented as a separate course.
- (F) The length of a full-time program shall be a minimum of four (4) semesters or two (2) academic years.

(Indiana State Board of Nursing: 848 IAC 1-2-17; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4532; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-18 Curriculum; licensed practical nurse program
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 18. (a) The length of a full-time program shall be two (2) semesters and one (1) summer session or four (4) quarters within one (1) calendar year.

(b) The curriculum shall provide instruction in the following areas:

- (1) Physical and biological sciences, including content drawn from the areas of:
 - (A) anatomy;
 - (B) physiology;
 - (C) nutrition; and
 - (D) pharmacology;
 that may be integrated, combined, or presented as separate courses.
- (2) Social and behavioral sciences, including content drawn from the concepts of mental health that may be integrated, combined, or presented as separate courses.
- (3) The nursing content shall establish the following:

(A) Provide concurrent theory and clinical experience in the following areas:

- (i) Adult nursing.
- (ii) Obstetric nursing.
- (iii) Nursing of children.
- (iv) Geriatric nursing.

(B) Include history, trends, legal aspects, and ethical aspects of nursing that may be integrated, combined, or presented as separate courses.

(C) Include content about chemical substance abuse among professionals.

(D) Computer technology shall be integrated, combined, or presented as a separate course.

(E) Universal precautions education shall be integrated, combined, or presented as a separate course.

(Indiana State Board of Nursing; 848 IAC 1-2-18; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4532; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-19 Clinical laboratory experience; all programs

Authority: IC 25-23-1-7

Affected: IC 25-23-1-20

Sec. 19. (a) Clinical facilities used for learning experiences shall be approved by the Joint Commission on Accreditation of Healthcare Organizations or appropriate licensing bodies.

(b) There shall be written agreements between the school and any institution or agency which is used for clinical laboratory experiences. Agreements shall state the responsibilities and privileges of both parties. A copy of the written agreement shall be submitted to the board for approval six (6) months prior to the beginning of the experience. Written agreements are not necessary for observational experiences.

(c) A request for approval of clinical facilities shall be submitted to the board for initial approval six (6) months prior to the use of that facility on forms provided by the board. A site visit may be made to any clinical facility not previously visited by a representative of the board, prior to approval of the facility. A site visit shall be made by a representative of the board prior to denial of the use of any clinical facility. The site visitor shall secure data concerning:

- (1) the size of the facility;
- (2) the number of other nursing programs using the facility; and
- (3) the time of use and problems of overcrowding;

as well as other aspects of the learning environment.

(d) School faculty shall assign, guide, evaluate, and supervise students in their learning experiences.

(e) Clinical facilities no longer being utilized by the nursing program shall be indicated on forms provided by the board.

(f) The ratio of faculty to students shall be a maximum of 1:10 or any portion thereof in the clinical laboratory experience, exclusive of the nurse director or coordinator. *(Indiana State Board of Nursing; 848 IAC 1-2-19; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4532; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 1-2-20 Educational facilities

Authority: IC 25-23-1-7

Affected: IC 25-23-1-20

Sec. 20. (a) Classrooms, laboratories, and conference rooms shall be provided to meet the needs of the students.

(b) The library shall be adequate in size and have current holdings to meet the educational needs of the students and faculty. There shall be a variety of current audiovisual and computer aids for individual and group instruction. The annual budget shall provide for accessions to the library.

(c) Furnishings, supplies, and office equipment shall be provided for the director, faculty, and clerical staff.

(d) Adequate office space shall be provided for the director, faculty, and clerical staff.

(e) There shall be adequate support services and secretarial personnel to meet the needs of the program.

(Indiana State Board of Nursing; 848 IAC 1-2-20; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4533; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-21 Progression and graduation

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 21. (a) There shall be written requirements for progression and graduation prepared by the faculty of each program. There shall be a written policy and procedure for academic probation and termination from the program. There shall be a code of conduct for students.

(b) The nursing program shall provide to enrolled students a student handbook that shall include all information specific to the nursing program.

(c) Candidates for the registered nurse licensing examination shall have successfully completed the educational program with an accumulative average grade of "C" or better, and a grade of "C" or better in each nursing course as identified in section 17 of this rule.

(d) Candidates for the practical nurse licensing examination shall have successfully completed the educational program with a grade of "C" or better in each course. *(Indiana State Board of Nursing; 848 IAC 1-2-21; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4533; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 1-2-22 Records and school bulletin

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 22. (a) There shall be a record system that provides for accurate recording of admission data and student academic records. Provisions shall be made for safe

storage of records to prevent loss by destruction and unauthorized use.

(b) Individual student files, maintained by the program of nursing during the student's enrollment, shall include, at a minimum, the following:

- (1) Documents required for admission.
- (2) Results of performance evaluation relating to the student's progression or lack thereof.
- (3) Documentation of universal precautions training.

(c) The institution must maintain in readily accessible form, or cause to be maintained in readily accessible form, sufficient records to generate an official student transcript for a period of sixty (60) years after the date the student attended the institution.

(d) Information about the school shall be published periodically, at least every two (2) years. The publication shall be dated and include the following:

- (1) Philosophy and objectives of the school.
- (2) A general description of the program.
- (3) The curriculum plan.
- (4) Brief course descriptions.
- (5) Facilities and conditions provided for student learning and welfare.
- (6) Faculty information.
- (7) A statement of tuition, fees, and refund policies.
- (8) A statement regarding nondiscriminatory practices in student and faculty recruitment.
- (9) A statement regarding student complaint and grievance procedures.
- (10) Housing and residence facilities information.
- (11) Admission, progression, and graduation practices.

(Indiana State Board of Nursing; 848 IAC 1-2-22; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4533; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-23 Reports to the board

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 23. (a) The director of the nursing program shall submit an annual report to the board on forms provided by the board. The report shall provide current data on the following:

- (1) Administrative personnel, credit hours, and faculty to student ratios.
- (2) Organizational, administrative, and physical changes.
- (3) Any curriculum changes.
- (4) Student statistics.
- (5) A faculty list with:
 - (A) a completed faculty qualification record for each new member;
 - (B) a supplemental qualification record for each faculty member pursuing a master's degree; and

(C) a list of faculty no longer employed by the institution since the last annual report.

(6) A clinical agency list and a list of those agencies no longer used since the last annual report.

(7) An organizational chart for the nursing program and for the parent institution.

(b) A list of graduates applying for licensing examinations shall be submitted on forms provided by the board prior to requesting applications for distribution to students. *(Indiana State Board of Nursing; 848 IAC 1-2-23; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4534; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 1-2-24 Records

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 24. A copy of each annual report to the board, the school catalog, and nursing student handbook shall be maintained in the permanent records of the institution. *(Indiana State Board of Nursing; 848 IAC 1-2-24; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4534; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

ARTICLE 2. STANDARDS FOR THE COMPETENT PRACTICE OF REGISTERED AND LICENSED PRACTICAL NURSING

Rule 1. Definitions

848 IAC 2-1-1 Applicability

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 1. The definitions in this rule apply throughout this article. *(Indiana State Board of Nursing; 848 IAC 2-1-1; filed Oct 25, 1991, 5:00 p.m.: 15 IR 242; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 2-1-2 "Competence" defined

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 2. "Competence" means performing skillfully and proficiently the functions that are within the role of the licensee and demonstrating behavior that is consistent with the interrelationship of essential knowledge, judgment, and skill. *(Indiana State Board of Nursing; 848 IAC 2-1-2; filed Oct 25, 1991, 5:00 p.m.: 15 IR 242; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 2-1-3 "Health team" defined

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 3. "Health team" means a group of health care providers which may, in addition to health care practitioners, include the patient/client, family, and any significant others. *(Indiana State Board of Nursing; 848 IAC*

2-1-3: filed Oct 25, 1991, 5:00 p.m.: 15 IR 243; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

Rule 2. Registered Nursing

848 IAC 2-2-1 Responsibility to apply the nursing process

Authority: IC 25-23-1-7

Affected: IC 25-23

following: Sec. 1. The registered nurse shall do the

- (1) Assess the patient/client in a systematic, organized manner.
- (2) Formulate a nursing diagnosis based on accessible, communicable, and recorded data which is collected in a systematic and continuous manner.
- (3) Plan care which includes goals and prioritized nursing approaches or measures derived from the nursing diagnosis.
- (4) Implement strategies to provide for patient/client participation in health promotion, maintenance, and restoration.
- (5) Initiate nursing actions to assist the patient/client to maximize his or her health capabilities.
- (6) Evaluate with the patient/client the status of goal achievement as a basis for reassessment, reordering priorities, new goal-setting, and revision of the plan of nursing care.
- (7) Seek educational resources and create learning experiences to enhance and maintain current knowledge and skills for his or her continuing competence in nursing practice and individual professional growth.

(Indiana State Board of Nursing: 848 IAC 2-2-1; filed Oct 25, 1991, 5:00 p.m.: 15 IR 243; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 2-2-2 Responsibility as a member of the nursing profession

Authority: IC 25-23-1-7

Affected: IC 25-23

following: Sec. 2. The registered nurse shall do the

- (1) Function within the legal boundaries of nursing practice based on the knowledge of statutes and rules governing nursing.
- (2) Accept responsibility for individual nursing actions and continued competence.
- (3) Communicate, collaborate, and function with other members of the health team to provide safe and effective care.
- (4) Seek education and supervision as necessary when implementing nursing practice techniques.
- (5) Respect the dignity and rights of the patient/client regardless of socioeconomic status, personal attributes, or nature of health problem.

(6) Maintain each patient/client's right to privacy by protecting confidential information unless obligated, by law, to disclose the information.

(7) Provide nursing care without discrimination on the basis of diagnosis, age, sex, race, creed, or color.

(8) Delegate and supervise only those nursing measures which the nurse knows, or should know, that another person is prepared, qualified, or licensed to perform.

(9) Retain professional accountability for nursing care when delegating nursing intervention.

(10) Respect and safeguard the property of patient/client, family, significant others, and the employer.

(11) Notify, in writing, the appropriate party, which may include:

- (A) the office of the attorney general, consumer protection division;
- (B) his or her employer or contracting agency; or
- (C) the board;

of any unprofessional conduct which may jeopardize the patient/client safety.

(12) Participate in the review and evaluation of the quality and effectiveness of nursing care.

(Indiana State Board of Nursing: 848 IAC 2-2-2; filed Oct 25, 1991, 5:00 p.m.: 15 IR 243; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 2-2-3 Unprofessional conduct

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 3. Nursing behaviors (acts, knowledge, and practices) failing to meet the minimal standards of acceptable and prevailing nursing practice, which could jeopardize the health, safety, and welfare of the public, shall constitute unprofessional conduct. These behaviors shall include, but are not limited to, the following:

(1) Using unsafe judgment, technical skills, or inappropriate interpersonal behaviors in providing nursing care.

(2) Performing any nursing technique or procedure for which the nurse is unprepared by education or experience.

(3) Disregarding a patient/client's dignity, right to privacy, or right to confidentiality.

(4) Failing to provide nursing care because of diagnosis, age, sex, race, color, or creed.

(5) Abusing a patient/client verbally, physically, emotionally, or sexually.

(6) Falsifying, omitting, or destroying documentation of nursing actions on the official patient/client record.

(7) Abandoning or knowingly neglecting patients/clients requiring nursing care.

(8) Delegating nursing care, functions, tasks, or responsibility to others when the nurse knows, or should know, that such delegation is to the detriment of patient safety.

- (9) Providing one's license/temporary permit to another individual for any reason.
- (10) Failing to practice nursing in accordance with prevailing nursing standards due to physical or psychological impairment.
- (11) Diverting prescription drugs for own or another person's use.
- (12) Misappropriating money or property from a patient/client or employee.
- (13) Failing to notify, in writing, the appropriate party, which may include:

- (A) the office of the attorney general, consumer protection division;
- (B) his or her employer or contracting agency; or
- (C) the board;

of any unprofessional conduct which may jeopardize patient/client safety.

(Indiana State Board of Nursing; 848 IAC 2-2-3; filed Oct 25, 1991, 5:00 p.m.: 15 IR 243; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

Rule 3. Licensed Practical Nursing

848 IAC 2-3-1 Responsibility to apply the nursing process

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 1. The licensed practical nurse shall do the following:

- (1) Know and utilize the nursing process in planning, implementing, and evaluating health services and nursing care to the individual patient or client.
- (2) Collaborate with other members of the health team in providing for patient/client participation in health promotion, maintenance, and restoration.
- (3) Seek educational resources and create learning experiences to enhance and maintain current knowledge and skills for his or her continuing competence in nursing practice and individual professional growth.
- (4) Assess the health status of the patient/client, in conjunction with other members of the health care team, for analysis and identification of health goals.
- (5) Evaluate with the patient/client the status of goal achievement as a basis for reassessment, reordering of priorities, and new goal setting for contribution to the modification of the plan of nursing care.

(Indiana State Board of Nursing; 848 IAC 2-3-1; filed Oct 25, 1991, 5:00 p.m.: 15 IR 244; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 2-3-2 Responsibility as a member of the health team

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 2. The licensed practical nurse shall do the following:

- (1) Function within the legal boundaries of practical nursing practice based on the knowledge of statutes and rules governing nursing.
- (2) Accept responsibility for individual nursing actions and continued competence.
- (3) Communicate, collaborate, and function with other members of the health care team to provide safe and effective care.
- (4) Seek education and supervision as necessary from registered nurses and/or other members of the health care team when implementing nursing techniques or practices.
- (5) Respect the dignity and rights of the patient/client regardless of socioeconomic status, personal attributes, or nature of health problems.
- (6) Maintain each patient/client's right to privacy by protecting confidential information unless obligated, by law, to disclose the information.
- (7) Provide nursing care without discrimination on the basis of diagnosis, age, sex, race, creed, or color.
- (8) Accept only those delegated nursing measures which he or she knows he or she is prepared, qualified, and licensed to perform.
- (9) Respect and safeguard the property of patient/client, family, significant others, and the employer.
- (10) Notify, in writing, the appropriate party which may include:

- (A) the office of the attorney general, consumer protection division;
- (B) his or her employer or contracting agency; or
- (C) the board;

of any unprofessional conduct which may jeopardize the patient/client safety.

- (11) Participate in the review and evaluation of the quality and effectiveness of nursing care.

(Indiana State Board of Nursing; 848 IAC 2-3-2; filed Oct 25, 1991, 5:00 p.m.: 15 IR 244; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 2-3-3 Unprofessional conduct

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 3. Nursing behaviors (acts, knowledge, and practices) failing to meet the minimal standards of acceptable and prevailing licensed practical nursing practices, which could jeopardize the health, safety, and welfare of the public shall constitute unprofessional conduct. These behaviors shall include, but are not limited to, the following:

- (1) Using unsafe judgment, technical skills, or inappropriate interpersonal behaviors in providing nursing care.
- (2) Performing any nursing technique or procedure for which the nurse is unprepared by education or experience.

(3) Disregarding a patient/client's dignity, right to privacy, or right to confidentiality.

(4) Failing to provide nursing care because of diagnosis, age, sex, race, color, or creed.

(5) Abusing a patient/client verbally, physically, emotionally, or sexually.

(6) Falsifying, omitting, or destroying documentation of nursing actions on the official patient/client record.

(7) Abandoning or knowingly neglecting patients/clients requiring nursing care.

(8) Accepting delegated nursing measures that he or she knows that he or she is not prepared, qualified, or licensed to perform.

(9) Providing one's license/temporary permit to another individual for any reason.

(10) Failing to practice nursing in accordance with prevailing practical nursing standards due to physical or psychological impairment.

(11) Diverting prescription drugs for own or another person's use.

(12) Misappropriating money or property from a patient/client or employee.

(13) Failing to notify, in writing, the appropriate party which may include:

- (A) the office of the attorney general, consumer protection division;
- (B) his or her employer or contracting agency; or
- (C) the board;

of any unprofessional conduct which may jeopardize patient/client safety.

(Indiana State Board of Nursing; 848 IAC 2-3-3; filed Oct 25, 1991, 5:00 p.m.: 15 IR 245; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

ARTICLE 3. NURSE-MIDWIVES

Rule 1. Definitions

848 IAC 3-1-0.5 Applicability

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 0.5. The definitions in this rule apply throughout this article. *(Indiana State Board of Nursing; 848 IAC 3-1-0.5; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2871; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 3-1-0.6 "Board" defined

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 0.6. "Board" means the Indiana state board of nursing. *(Indiana State Board of Nursing; 848 IAC 3-1-0.6; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2871; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 3-1-1 "Certified nurse-midwife" defined; use of initials

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1

Sec. 1. (a) "Certified nurse-midwife" means a registered nurse who has graduated from a nationally accredited school of midwifery, has passed the National Certifying Examination given by the American College of Nurse-Midwives, and is licensed by the board to practice as a nurse-midwife.

(b) "CNM" means certified nurse-midwife and are the designated authorized initials to be used by the certified nurse-midwife. *(Indiana State Board of Nursing; Nurse-Midwifery Rule 1, Art 1; filed Jun 15, 1979, 4:41 p.m.: 2 IR 1131; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2871; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 3-1-1) to the Indiana State Board of Nursing (848 IAC 3-1-1) by P.L.185-1993, SECTION 16, effective July 1, 1993.*

848 IAC 3-1-2 "Practice of nurse-midwifery" defined

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 2. "Practice of nurse-midwifery" means the practice of nursing and the extension of that practice, including well-woman gynecological healthcare, family planning, and care to the normal and expanding family throughout pregnancy, labor, delivery, and post-delivery. *(Indiana State Board of Nursing; Nurse-Midwifery Rule 1, Art 2; filed Jun 15, 1979, 4:41 p.m.: 2 IR 1131; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 3-1-2) to the Indiana State Board of Nursing (848 IAC 3-1-2) by P.L.185-1993, SECTION 16, effective July 1, 1993.*

848 IAC 3-1-3 Association with licensed physician; jurisdiction of board *(Repealed)*

Sec. 3. *(Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)*

848 IAC 3-1-4 Registration requirement *(Repealed)*

Sec. 4. *(Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)*

848 IAC 3-1-5 Application for registration; qualifications *(Repealed)*

Sec. 5. *(Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)*

848 IAC 3-1-6 Fees for registration *(Repealed)*

Sec. 6. *(Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)*

848 IAC 3-1-7 Photograph submitted with application *(Repealed)*

Sec. 7. *(Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)*

848 IAC 3-1-8 Screening applicant; approval (Repealed)

Sec. 8. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-9 Temporary registration not offered (Repealed)

Sec. 9. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-10 Biennial re-registration (Repealed)

Sec. 10. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-11 Notice of re-registration (Repealed)

Sec. 11. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-12 Fee for re-registration (Repealed)

Sec. 12. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-13 Delinquency fee (Repealed)

Sec. 13. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-14 Suspension of registration for delinquency (Repealed)

Sec. 14. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-15 Retirement and surrender of registration (Repealed)

Sec. 15. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-16 Hearings regarding registration or disciplinary proceedings (Repealed)

Sec. 16. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

Rule 2. General Provisions

848 IAC 3-2-1 Application for limited license; qualifications

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 1. Every applicant for limited license shall file an application on a form supplied by the board. (Indiana State Board of Nursing; 848 IAC 3-2-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 3-2-2 Fees for limited license

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 2. (a) Each applicant for a limited license in nurse-midwifery shall pay a fee as provided in 848 IAC 1-1-14 in the form of a personal check, certified check, cashier's check, or money order payable to the health professions bureau. This fee is not refundable, but may be used up to and including one (1) year from the original submission of the application.

(b) The fee for any reapplication shall be the same as determined by the board for the original application and is payable in the form of a personal check, certified check, cashier's check, or money order payable to the health professions bureau. (Indiana State Board of Nursing; 848 IAC 3-2-2; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1328)

848 IAC 3-2-3 Photograph submitted with application

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 3. A recent passport type photograph of the applicant taken within six (6) weeks prior to filing shall be submitted with each application. The photograph shall be in color on semigloss paper, not less than three (3) inches wide and four (4) inches high. (Indiana State Board of Nursing; 848 IAC 3-2-3; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 3-2-4 Temporary permit not issued

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 4. No temporary permit will be issued under any circumstances. (Indiana State Board of Nursing; 848 IAC 3-2-4; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 3-2-5 Biennial renewal of limited license

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 5. Every person with a limited license to practice nurse-midwifery shall renew such limited license with the board on or before October 31 of odd-numbered years. (Indiana State Board of Nursing; 848 IAC 3-2-5; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329)

848 IAC 3-2-6 Notice of renewal

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 6. On or before August 31 of odd-numbered years, the health professions bureau shall notify each nurse-midwife that he or she is required to renew their limited license to practice nurse-midwifery. At the time of such notice, the health professions bureau shall mail a form to each nurse-midwife to the last known address of record.

(Indiana State Board of Nursing; 848 IAC 3-2-6; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 3-2-7 Fee for renewal

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 7. At the time of submitting his or her limited license renewal form to the board, each nurse-midwife shall submit a fee as provided in 848 IAC 1-1-14 and proof of current licensure as a registered nurse. A personal check, certified check, cashier's check, or money order shall be submitted to the health professions bureau with the renewal form and shall be made payable to the health professions bureau. *(Indiana State Board of Nursing; 848 IAC 3-2-7; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 3-2-8 Delinquent fee

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 8. In the event any nurse-midwife fails to complete the renewal process on or before October 31 of odd-numbered years, he or she shall be required to pay a delinquent fee to be determined by the board in addition to the fees prescribed in section 7 of this rule for each year that the limited license is delinquent. *(Indiana State Board of Nursing; 848 IAC 3-2-8; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2873; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

Rule 3. Competent Practice of Nurse-Midwifery

848 IAC 3-3-1 Competent practice of nurse-midwives

Authority: IC 25-23-1-7

Affected: IC 16-21; IC 25-23-1-1;
IC 25-23-1-13.1

Sec. 1. A nurse-midwife shall perform as an independent and interdependent member of the health care team as defined in 848 IAC 2-1-3. The following are standards for each nurse-midwife:

(1) Assess clients by using advanced knowledge and skills to:

- (A) identify abnormal conditions;
- (B) diagnose health problems;
- (C) develop and implement nursing treatment plans; and
- (D) evaluate patient outcomes.

(2) Use advanced knowledge and skills in teaching and guiding clients and other health care team members.

(3) Use appropriate critical thinking skills to make independent decisions, commensurate with the autonomy, authority, and responsibility of the practice of nurse-midwifery.

(4) Function within the legal boundaries of the practice of nurse-midwifery and shall have and utilize knowledge of the statutes and rules governing the practice of nurse-midwifery, including the following:

(A) State and federal drug laws and regulations.

(B) State and federal confidentiality laws and regulations.

(C) State and federal medical records access laws.

(5) Consult and collaborate with other members of the health care team as appropriate to provide reasonable client care.

(6) Recognize the limits of individual knowledge and experience, and consult with or refer clients to other health care providers as appropriate.

(7) Retain professional accountability for any delegated intervention, and delegate interventions only as authorized by IC 25-23-1 and this title.

(8) Maintain current knowledge and skills in the practice of nurse-midwifery.

(9) Manage and provide health care services in the practice of nurse-midwifery.

(10) Provide individual and group counseling and teaching throughout the life cycle.

(11) Participate in periodic and joint evaluation of services rendered, including, but not limited to, the following:

(A) Chart reviews.

(B) Case reviews.

(C) Client evaluations.

(D) Outcome statistics.

(12) Conduct and apply research findings appropriate to the area of practice.

(13) Participate, when appropriate, in the joint review and revision of written guidelines involving the plan of care.

(Indiana State Board of Nursing; 848 IAC 3-3-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2873; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

Rule 4. Limitations of Rules

848 IAC 3-4-1 Limitations of rules (Repealed)

Sec. 1. (Repealed by Indiana State Board of Nursing; filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329)

Rule 5. Fees for Nurse-Midwives

848 IAC 3-5-1 Fees for nurse-midwives

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1; IC 25-23-1-13.1

Sec. 1. (a) The application fee for limited licensure as a nurse-midwife shall be fifty dollars (\$50).

(b) The fee for renewal of a nurse-midwife limited license shall be fifty dollars (\$50).

(c) The penalty fee for late renewals is as established by the health professions bureau.

(d) The fee for a duplicate nurse-midwife wall certificate shall be ten dollars (\$10).

(e) The fee for endorsement out of Indiana for a nurse-midwife shall be ten dollars (\$10). *(Indiana State*

Board of Nursing; 848 IAC 3-5-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2873; filed Dec 19, 1996, 10:00 a.m.: 20 IR 1123; readopted filed Jul 30, 2001, 2:07 p.m.: 24 IR 4237)

ARTICLE 4. ADVANCED PRACTICE NURSING AND PRESCRIPTIVE AUTHORITY FOR ADVANCED PRACTICE NURSING

Rule 1. Definitions

848 IAC 4-1-1 Applicability

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 1. The definitions in this rule apply throughout this article and 848 IAC 5. *(Indiana State Board of Nursing; 848 IAC 4-1-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2874; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 4-1-2 "Board" defined

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 2. "Board" means the Indiana state board of nursing. *(Indiana State Board of Nursing; 848 IAC 4-1-2; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2874; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 4-1-3 "Advanced practice nurse" defined

Authority: IC 25-23-1-7

Affected: IC 16-21; IC 25-23-1-1

Sec. 3. (a) "Advanced practice nurse" means a registered nurse holding a current license in Indiana who:

- (1) has obtained additional knowledge and skill through a formal, organized program of study and clinical experience, or its equivalent, as determined by the board;
- (2) functions in an expanded role of nursing at a specialized level through the application of advanced knowledge and skills to provide healthcare to individuals, families, or groups in a variety of settings, including, but not limited to:

- (A) homes;
 - (B) institutions;
 - (C) offices;
 - (D) industries;
 - (E) schools;
 - (F) community agencies;
 - (G) private practice;
 - (H) hospital outpatient clinics; and
 - (I) health maintenance organizations;
- and

(3) makes independent decisions about the nursing needs of clients.

(b) The three (3) categories of advanced practice nurses as defined in IC 25-23-1-1 are as follows:

- (1) Nurse practitioner as defined in section 4 of this rule.
- (2) Certified nurse-midwife as defined in 848 IAC 3-1.

(3) Clinical nurse specialist as defined in section 5 of this rule.

(Indiana State Board of Nursing; 848 IAC 4-1-3; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2874; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329)

848 IAC 4-1-4 "Nurse practitioner" defined

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 4. (a) "Nurse practitioner" means an advanced practice nurse who provides advanced levels of nursing client care in a specialty role, who meets the requirements of an advanced practice nurse as outlined in section 3 of this rule, and who has completed any of the following:

(1) A graduate program offered by a college or university accredited by the Commission on Recognition of Postsecondary Accreditation which prepares the registered nurse to practice as a nurse practitioner and meets the requirements of section 6 of this rule.

(2) A certificate program offered by a college or university accredited by the Commission on Recognition of Postsecondary Accreditation which prepares the registered nurse to practice as a nurse practitioner and meets the requirements of section 6 of this rule. Nurse practitioners who complete a certificate program must be certified and maintain certification as a nurse practitioner by a national organization which requires a national certifying examination.

(3) Prior to the promulgation of this article, the following:

(A) A formal organized program of study and clinical experience which prepares the registered nurse to practice as a nurse practitioner.

(B) The required program of study at a time when there was no credentialing or certification process available in the specialty area of the program of study.

(b) "NP" means nurse practitioner and are the designated authorized initials to be used by the nurse practitioner. *(Indiana State Board of Nursing; 848 IAC 4-1-4; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2874; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)*

848 IAC 4-1-5 "Clinical nurse specialist" defined

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 5. (a) "Clinical nurse specialist" means an advanced practice nurse who does the following:

(1) Meets the requirements of an advanced practice nurse as outlined in section 3 of this rule.

(2) Has completed a graduate program offered by a college or university accredited by the Commission on Recognition of Postsecondary Accreditation designed to train clinical nurse specialists which grants, at a minimum, a

master's degree and which meets the requirements of section 6 of this rule.

(3) Provides advanced levels of client care and assists other health professionals in establishing and meeting health goals. Clinical nurse specialists collaborate and consult with other health care providers who may need assistance in dealing with complex client problems.

(b) "CNS" means clinical nurse specialist and are the designated authorized initials to be used by the clinical nurse specialist. (*Indiana State Board of Nursing; 848 IAC 4-1-5; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2874; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 4-1-6 "Formal organized program of study and clinical experience or the equivalent as determined by the board" defined

Authority: IC 25-23-1-7

Affected: IC 25-23-1-1

Sec. 6. "Formal organized program of study and clinical experience or the equivalent as determined by the board" means:

(1) a program offered by a college or university accredited by the Commission on Recognition of Postsecondary Accreditation that includes:

- (A) instruction in the biological, behavioral, medical, and nursing sciences relevant to practice as an advanced practice nurse in a specified category;
- (B) instruction in the legal, ethical, and professional responsibilities of advanced practice nursing; and
- (C) supervised clinical practice of those skills used by the advanced practice nurse in a specialty role; or

(2) experience obtained in collaboration with a physician, prior to the promulgation of this article, which was required by a national organization as a prerequisite for a national certifying examination used to certify a registered nurse in a specialty area.

(*Indiana State Board of Nursing; 848 IAC 4-1-6; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2875; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329*)

Rule 2. Competent Practice of Nurse Practitioners

848 IAC 4-2-1 Competent practice of nurse practitioners

Authority: IC 25-23-1-7

Affected: IC 25-23-1-19.4

Sec. 1. A nurse practitioner shall perform as an independent and interdependent member of the health team as defined in 848 IAC 2-1-3. The following are standards for each nurse practitioner:

(1) Assess clients by using advanced knowledge and skills to:

- (A) identify abnormal conditions;
- (B) diagnose health problems;

- (C) develop and implement nursing treatment plans;
- (D) evaluate patient outcomes; and
- (E) collaborate with or refer to a practitioner, as defined in IC 25-23-1-19.4, in managing the plan of care.

(2) Use advanced knowledge and skills in teaching and guiding clients and other health team members.

(3) Use appropriate critical thinking skills to make independent decisions, commensurate with the autonomy, authority, and responsibility of a nurse practitioner.

(4) Function within the legal boundaries of their advanced practice area and shall have and utilize knowledge of the statutes and rules governing their advanced practice area, including the following:

- (A) State and federal drug laws and regulations.
- (B) State and federal confidentiality laws and regulations.
- (C) State and federal medical records access laws.

(5) Consult and collaborate with other members of the health team as appropriate to provide reasonable client care, both acute and ongoing.

(6) Recognize the limits of individual knowledge and experience, and consult with or refer clients to other health care providers as appropriate.

(7) Retain professional accountability for any delegated intervention, and delegate interventions only as authorized by IC 25-23-1 and this title.

(8) Maintain current knowledge and skills in the nurse practitioner area.

(9) Conduct an assessment of clients and families which may include health history, family history, physical examination, and evaluation of health risk factors.

(10) Assess normal and abnormal findings obtained from the history, physical examination, and laboratory results.

(11) Evaluate clients and families regarding development, coping ability, and emotional and social well-being.

(12) Plan, implement, and evaluate care.

(13) Develop individualized teaching plans with each client based on health needs.

(14) Counsel individuals, families, and groups about health and illness and promote attention to wellness.

(15) Participate in periodic or joint evaluations of service rendered, including, but not limited to, the following:

- (A) Chart reviews.
- (B) Client evaluations.
- (C) Outcome statistics.

(16) Conduct and apply research findings appropriate to the area of practice.

(17) Participate, when appropriate, in the joint review of the plan of care.

(Indiana State Board of Nursing; 848 IAC 4-2-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2875; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

Rule 3. Competent Practice of Clinical Nurse Specialists

848 IAC 4-3-1 Competent practice of clinical nurse specialists

Authority: IC 25-23-1-7

Affected: IC 16-21; IC 25-23-1-1; IC 25-23-1-33

Sec. 1. A clinical nurse specialist shall perform as an independent and interdependent member of the health care team as defined in 848 IAC 2-1-3. The following are standards for each clinical nurse specialist:

(1) Assess clients by using advanced knowledge and skills to:

- (A) identify abnormal conditions;
- (B) diagnose health problems;
- (C) develop and implement nursing treatment plans; and
- (D) evaluate patient outcomes.

(2) Use advanced knowledge and skills in teaching and guiding clients and other health team members.

(3) Use appropriate critical thinking skills to make independent decisions, commensurate with the autonomy, authority, and responsibility of the clinical nurse specialist.

(4) Function within the legal boundaries of their advanced practice area and shall have and utilize knowledge of the statutes and rules governing their advanced practice areas, including the following:

- (A) State and federal drug laws and regulations.
- (B) State and federal confidentiality laws and regulations.
- (C) State and federal medical records access laws.

(5) Consult and collaborate with other members of the health team as appropriate to provide reasonable client care.

(6) Recognize the limits of individual knowledge and experience, and consult with or refer clients to other health care providers as appropriate.

(7) Retain professional accountability for any delegated intervention, and delegate interventions only as authorized by IC 25-23-1 and this title.

(8) Maintain current knowledge and skills in their clinical nurse specialist area.

(9) Provide direct nursing care utilizing advanced scientific knowledge, nursing theory, and nursing skills in the assessment, planning, implementation, and evaluation of health and nursing care of individual clients.

(10) Provide indirect nursing care through planning, guiding, evaluating, and directing nursing care delivered by nursing and ancillary personnel as authorized by IC 25-23-1 and this title.

(11) Conduct nursing research, including methods of nursing intervention and healthcare in the area of specialization, and apply research findings appropriate to the area of practice.

(12) Teach and counsel individuals or groups by utilizing communication skills and teaching or learning theories to increase knowledge or functioning of individuals or groups, nursing personnel, students, and other members of the health care team.

(13) Serve as a consultant and as a resource, utilizing advanced health knowledge and skills, to those who are directly and indirectly involved in patient care.

(14) Participate in periodic evaluation of services rendered, including, but not limited to, the following:

- (A) Chart reviews.
- (B) Case reviews.
- (C) Patient evaluations.
- (D) Outcome of case statistics.

(Indiana State Board of Nursing; 848 IAC 4-3-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2876; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

Rule 4. Limitations of Rules

848 IAC 4-4-1 Limitations of rules *(Repealed)*

Sec. 1. *(Repealed by Indiana State Board of Nursing; filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329)*

ARTICLE 5. PRESCRIPTIVE AUTHORITY FOR ADVANCED PRACTICE NURSING

Rule 1. Prescriptive Authority

848 IAC 5-1-1 Initial authority to prescribe legend drugs

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 1. (a) An advanced practice nurse may be authorized to prescribe legend drugs, including controlled substances, if the advanced practice nurse does the following:

(1) Submits an application on a form prescribed by the board with the required fee, including, but not limited to, the following information:

- (A) Complete name, residence and office addresses with zip codes, and residence and business telephone numbers with area codes.
- (B) All names used by the applicant, explaining the reasons for any name change or use.
- (C) Date and place of birth.
- (D) Citizenship and visa status, if applicable.
- (E) A complete statement of all nursing education received, providing:

- (i) names and locations of all colleges, schools, or universities attended;
 - (ii) dates of attendance; and
 - (iii) degrees obtained or received.
- (F) Whether the applicant has ever had any disciplinary action taken against the applicant's nursing license by the board or by the licensing agency of any other state or jurisdiction and the details and dates thereof.
- (G) A complete list of all places of employment, including:
 - (i) the names and addresses of employers;
 - (ii) the dates of each employment; and
 - (iii) employment responsibilities held or performed which the applicant had since graduation from nursing school.
- (H) Whether the applicant is, or has been, addicted to any narcotic drug, alcohol, or other drugs and, if so, the details thereof.
- (I) Whether the applicant has been convicted of any violation of law relating to drug abuse, controlled substances, narcotic drugs, or any other drugs.
- (J) Whether the applicant has previously been licensed to practice nursing in any other state or jurisdiction and, if so:
 - (i) the names of such states or jurisdictions which previously licensed the applicant;
 - (ii) the dates of such licensure;
 - (iii) the license number; and
 - (iv) the current status of such licensure.
- (K) Whether the applicant has been denied a license to practice nursing by any state or jurisdiction and, if so, the details thereof, including:
 - (i) the name and location of the state or jurisdiction denying licensure;
 - (ii) the date of denial of such licensure; and
 - (iii) the reasons relating thereto.
- (L) A certified statement that the applicant has not been convicted of a

criminal offense (excluding minor traffic violations), or a certified statement listing all criminal offenses of which the applicant has been convicted. This listing must include:

- (i) the offense of which the applicant was convicted;
- (ii) the court in which the applicant was convicted; and
- (iii) the cause number in which the applicant was convicted.

(M) All information in the application shall be submitted under oath or affirmation, subject to the penalties for perjury.

- (2) Submits proof of an active, unrestricted Indiana registered nurse license.
- (3) Submits proof of having met the requirements of all applicable laws for practice as an advanced practice nurse in the state of Indiana.
- (4) Submits proof of a baccalaureate or higher degree in nursing.
- (5) Submits proof of having successfully completed a graduate level pharmacology course, consisting of at least two (2) semester hours of academic credit from a college or university accredited by the Commission on Recognition of Postsecondary Accreditation:
 - (A) within five (5) years of the date of application; or
 - (B) as part of a degree program, with clear and convincing proof of subsequent collaborative experience as an advanced practice nurse within the last five (5) years, if the course was completed more than five (5) years, but not more than eight (8) years, prior to the date of application.
- (6) Submits proof of collaboration with a licensed practitioner, in the form of a written practice agreement that sets forth the manner in which the advanced practice nurse and licensed practitioner will cooperate, coordinate, and consult with each other in the provision of health care to patients. Practice agreements shall be in writing and shall also set forth provisions for the type of collaboration between the advanced practice nurse and the licensed practitioner, and the reasonable and timely review by the licensed practitioner of the prescribing practices of the advanced practice nurse. Specifically, the written practice agreement shall contain at least the following information:
 - (A) Complete names, home and business addresses, zip codes, and telephone numbers of the licensed practitioner and the advanced practice nurse.
 - (B) A list of all other offices or locations besides those listed in

clause (A) where the licensed practitioner authorized the advanced practice nurse to prescribe.

(C) All specialty or board certifications of the licensed practitioner and the advanced practice nurse.

(D) The specific manner of collaboration between the licensed practitioner and the advanced practice nurse, including how the licensed practitioner and the advanced practice nurse will:

- (i) work together;
- (ii) share practice trends and responsibilities;
- (iii) maintain geographic proximity; and
- (iv) provide coverage during absence, incapacity, infirmity, or emergency by the licensed practitioner.

(E) A description of what limitation, if any, the licensed practitioner has placed on the advanced practice nurse's prescriptive authority.

(F) A description of the time and manner of the licensed practitioner's review of the advanced practice nurse's prescribing practices. The description shall include provisions that the advanced practice nurse must submit documentation of the advanced practice nurse's prescribing practices to the licensed practitioner within seven (7) days. Documentation of prescribing practices shall include, but not be limited to, at least a five percent (5%) random sampling of the charts and medications prescribed for patients.

(G) A list of all other written practice agreements of the licensed practitioner and the advanced practice nurse.

(H) The duration of the written practice agreement between the licensed practitioner and the advanced practice nurse.

(7) Written practice agreements for advanced practice nurses applying for prescriptive authority shall not be valid until prescriptive authority is granted by the board.

(b) When the board determines that the applicant has met the requirements under subsection (a), the board shall send written notification of authority to prescribe to the advanced practice nurse, including the identification number and designated authorized initials to be used by the advanced practice nurse.

(c) Advanced practice nurses who have been granted prescriptive authority will immediately notify the board in writing of any changes in, or termination of, written practice agreements, including any changes in the

prescriptive authority of the collaborating licensed practitioner. Written practice agreements shall terminate automatically if the advanced practice nurse or licensed practitioner no longer has an active, unrestricted license.

(d) Advanced practice nurses wishing to prescribe controlled substances must obtain an Indiana controlled substances registration and a federal Drug Enforcement Administration registration. (*Indiana State Board of Nursing: 848 IAC 5-1-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2876; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

848 IAC 5-1-2 Prescribing legend drugs; use of forms (*Repealed*)

Sec. 2. (Repealed by Indiana State Board of Nursing; filed Dec 19, 1996, 10:00 a.m.: 20 IR 1122)

848 IAC 5-1-3 Renewal of authority to prescribe legend drugs

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 3. (a) Prescriptive authority for the advanced practice nurse expires on October 31 in each odd-numbered year. Failure to renew the prescriptive authority on or before the expiration date will automatically render the authority invalid without any action by the board.

(b) An application form and instructions for renewal of the authority to prescribe legend drugs will be mailed in odd-numbered years with the renewal for registered nurse licensure.

(c) Applicants for renewal of the prescriptive authority shall pay a renewal fee in addition to the fee for renewal of the registered nurse license.

(d) Applications for renewal of the prescriptive authority shall be mailed to the last known address of the licensee. Failure to receive the application for renewal shall not relieve the licensee of the responsibility for renewing the registered nurse license and the authorization to prescribe by the renewal date.

(e) Applicants for renewal of prescriptive authority shall submit to the board along with the renewal form and fee proof of at least thirty (30) actual contact hours of continuing education during the two (2) years immediately preceding renewal, including at least eight (8) actual contact hours of pharmacology, approved by a nationally approved sponsor of continuing education for nurses and approved by the board and contained on a list at the health professions bureau. (*Indiana State Board of Nursing: 848 IAC 5-1-3; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2878; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939*)

Rule 2. Limitations of Rules

848 IAC 5-2-1 Limitations of rules

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 1. No written practice agreement shall be necessary unless the advanced practice nurse seeks prescriptive authority. (*Indiana State Board of Nursing: 848*

*IAC 5-2-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2878;
readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329)*

Rule 3. Fees for Prescriptive Authority

848 IAC 5-3-1 Fees for prescriptive authority

Authority: IC 25-23-1-7

Affected: IC 25-23-1

Sec. 1. (a) The application fee for an advanced practice nurse to receive prescriptive authority shall be fifty dollars (\$50).

(b) The fee for renewal of advanced practice nurse prescriptive authority shall be ten dollars (\$10).

(c) The penalty fee for late renewals is as established by the health professions bureau.

(d) The fee for a duplicate wall certificate for advanced practice nurse prescriptive authority shall be ten dollars (\$10).

(e) The fee for written verification of advanced practice nurse prescriptive authority shall be ten dollars (\$10). *(Indiana State Board of Nursing; 848 IAC 5-3-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879; filed Jun 6, 1996, 9:00 a.m.: 19 IR 3105; readopted filed Jul 30, 2001, 2:07 p.m.: 24 IR 4237)*